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DIVISION OF COSPONATION

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COVER LETTER

IERS LLC		
Name of Limi	ited Liability Company	
	-	
ence concerning this matter	to the following:	
LAUREN M. KURTZ		
FOWLER RODRIGUEZ,	Name of Person LLP	
255 ALUANDDA CIDOU	Firm/Company	
355 ALHAMBRA CIRCLI	E, SUITE 801	
CORAL GABLES, FL 33	Address 134	
LKURTZ@FRFIRM.COM	City/State and Zip Code	
	•	fication)
	d1:	
	786 364-8400 at ()	
erson	Area Code Daytim	e Telephone Number
following amount:		
■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Name of Liminator incomment and fee(s) are subsence concerning this matter LAUREN M. KURTZ FOWLER RODRIGUEZ, 355 ALHAMBRA CIRCLE CORAL GABLES, FL 33 LKURTZ@FRFIRM.COM E-mail address: (to cerning this matter, please can be commended by the cerning this matter) ERED AGENT erson following amount:	Name of Limited Liability Company nendment and fee(s) are submitted for filing. ence concerning this matter to the following: LAUREN M. KURTZ Name of Person FOWLER RODRIGUEZ, LLP Firm/Company 355 ALHAMBRA CIRCLE, SUITE 801 Address CORAL GABLES, FL 33134 City/State and Zip Code LKURTZ@FRFIRM.COM E-mail address: (to be used for future annual report noticerning this matter, please call: ERED AGENT Table 1864-8400 Area Code Daytim Following amount: \$30.00 Filing Fee & Certificate of Status Certificate Copy

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

QFO PARTNERS LLC			
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)		
The Articles of Organization for this Limited Liability C Florida document number L18000188995	Company were filed on AUGUST 7, 2018	_ and assig	ned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company here:		
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" or the abbre	viation "L.L.	C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDI	RESS)	8	SIVI 3S
		-	<u> </u>
		29	유출도
		30	
Enter new mailing address, if applicable:		——————————————————————————————————————	- <u>3%</u> c
(Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
			<u> 2</u>
B. If amending the registered agent and/or registered agent and/or the new registered office add Name of New Registered Agent:	stered office address on our records, <u>enter the</u> ress here:	name of	the new
New Registered Office Address:			
	Enter Florida street address		-
	, Florida		
		Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	GUILLERO QUIRCH III	2701 S LE JEUNE ROAD, 12TH FLOOR	Add
		CORAL GABLES, FL 33134	
			Remove
			Change
MGR	GUILLERMO QUIRCH III	2701 S LE JEUNE ROAD, 12TH FLOOR	■ Add
		CORAL GABLES, FL 33134	
			☐ Remove
			☐ Change
			
		 	□ Remove
			Change
			Add
			Remove
			Change
			Add
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(If an effec	ve date, if other than the date of filing:	
	nt's effective date on the Department of State's records.	
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the 90th day after the record is filed.	earlier
Dated _	AUGUST 28 2018	
	Signature of a member or authorized representative of a member	_

Page 3 of 3

Filing Fee: \$25.00