118000 250 905

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
. (Ci	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)	
(DC	ocument Number)	
Cadifical Casina	Cadillianta of	Chatura
Certified Copies	_ Certificates of	Status
	<u> </u>	
Special Instructions to	Filing Officer:	
ļ		
ļ		

Office Use Only

524-



100322075641

12/21/18--01023--008 **30.00

2019 JAN 30 PM 5: 38

C. GOLDEN JAN 3 1 2019

COVER LETTER

Division of Corporations
SUBJECT: Pquant Investment Group, LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sandra Tiguant Name of Person
Firm/Company
гинг Соцрану
8120 SW 5th Ct,
North Lauderdale F1 3306 V City/State and Zip Code Sandra Piguanto smail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sanctra Figurant at (914) 588-7257 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section

TO:

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



January 8, 2019

SANDRA PIQUANT 8120 SW 5TH COURT NORTH LAUDERDALE, FL 33068

SUBJECT: PIQUANT INVESTMENT GROUP, LLC

Ref. Number: L18000250905

We have received your document and check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You must list the date on page 3.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 319A00000539

RECEIVED

SECRETARY OF STREET TALL AMASSEE, FL

ARTICLES OF AMENDMENT TO

All May Son ARTICLES OF ORGANIZATION OF The Articles of Organization for this Limited Liability Company were filed on 10 18000250905 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 81205W5tr+, North Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) ct, North Landerdole Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new

registered agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:	Enter Floridu street addre	zss
	, F	lorida
	City:	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 = M $AMBR = A$	lanager .uthorized Member •	•	
<u>Title</u>	<u>Name</u>	Address	Type of Action
•			□ Remove
			☐ Change
			□ Add
			□ Remove
			Add
			☐ Remove
			☐ Change
			☐ Remove
			☐ Change
			□ Add
			☐ Remove
			□ Change
			□ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.)7 (3)(is the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier (b) The 90th day after the record is filed.	of:
Dated January 27 2019.	
Signature of a member or authorized representative of a member	
Sandra Payont Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00