## 118000287521

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## **COVER LETTER**

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OUD ICZYP	QBIQ WALL	. CONCEPTS, LLC, Officer	change possision			
Name of Limited Liability Company						
The enclose	d Articles of Ar	mendment and fee(s) are sub-	mitted for filing.			
Please retur	n all correspond	dence concerning this matter	to the following:			
		ARSAK J ARU				
			Name of Person			
			Firm/Company	<u> </u>		
296 NW 164TH AVE						
			Address			
PEMBROKE PINES, FL, 33028					19 HAR	
		AJARU@EMAIL.COM	City/State and Zip Code COM			STATE OF THE STATE
		E-mail address: (	to be used for future annual report notific	ation)	25	
For further	information con	ocerning this matter, please ca	dl:		P	OF S
ARSAK J			954 558-1883 at ()		2։ 5և	ORATIONS
	Name of I	Person	Area Code Daytime	Telephone Number		SK(
Enclosed is	a check for the	following amount:				
□ \$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Stat Certified Copy radditional copy is end		

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



March 19, 2019

**ARSAK J ARU** 296 NW 164TH AVE PEMBROKE PINES, FL 33028

SUBJECT: QBIQ WALL CONCEPTS, LLC

Ref. Number: L18000287521

We have received your document for QBIQ WALL CONCEPTS, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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.

Diane Cushing Senior Section Administrator

Letter Number: 719A00005447

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

QBIQ WALL CONCEPTS, LLC		
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	nany as it now appears on our records.) I Liability Company)	<u></u>
The Articles of Organization for this Limited Liability Compan	y were filed on 12/14/2018	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "1 imited Lieb	pility Company," the designation "LLC" or the	re abbres lation "L.L.a.C."
Enter new principal offices address, if applicable:		<b>6</b> 055
(Principal office address MUST BE A STREET ADDRESS)		# 0 0 P
		25
		PH PH
Enter new mailing address, if applicable:		STATE ORATIO
(Mailing address MAY BE A POST OFFICE BOX)		2 17 E
		35
B. If amending the registered agent and/or registered		ter the name of the no
registered agent and/or the new registered office address he	<u>rre</u> :	
Name of New Registered Agent:		
New Registered Office Address:		<del>,</del>
	Enter Florida street address	
	Florida	
	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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MM	QBIQ HOLDING, B.V.	15800 PINES BLVD.	□ Add
		SUITE 3118	<u>.                                      </u>
			Remove
		PEMBROKE PINES, FL 33027	□ Change
MM	VAN VELSEN, MICHEL	15800 PINES BLVD.	
		SUITE 3118	B Add
			Remove
		PEMBROKE PINES, FL 33027	E Change
			_
			□ Remove
			Change
			Add
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Note: If the dat	if other than the is listed, the date must e inserted in this blo etive date on the De	ock does not m	eet the applica	to date of filing able statutory	or more than 90 of filing requireme	_ (optional) lays after (fling.) I ents, this date w	ursuant to 605,020 Il not be listed a
ne record spe The 90th d	ecifies a delayed ay after the reco	effective d ord is filed.	ate, but no	t an effecti	ve time, at 1	2:01 a.m. or	n the earlier o
Dated February	28th	·	2019	_ ·			
					_		

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Filing Fee: \$25.00