L19000248410

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COVER LETTER

TO: Registration Se Division of Cor			
Quetant in	vestment holdings llc		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Dan Quetant		
		Name of Person	
	Quetant investment hold	ling	
		Firm/Company	
	1175 PINELLAS POINT	DR S	
		Address	
	ST. PETERSBURG FLO		
		City/State.and Zip.Code	
	danquetant54321@gmail	.com to be used for future annual report no	
For further information co	oncerning this matter, please c	·	ancation)
kevin quetant	picase e	** * * * * * * * * * * * * * * * * * *	••••
<u> </u>		352 2090352 at ()	
Name of	Person	Area Code Dayti	me Telephone Number
Enclosed is a check for th	e 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 Status & Certified Copy (additional copy is enclosed)

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2320 ALD 13 Pil 6: 15

QUETANT INVESTMENT HOLDINGS LLC

1

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compa	ny were filed on 10/02/2019	and assigned
Florida document number L19000248410		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
-		
		-
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	ce address on our records, enter the na	ame of the new registered
New Registered Office Address:		
	Enter Florida street address	
	. Florida	
	City: Florida	Zip Code
New Registered Agent's Signature, if changing Registered Age	nt:	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered off company has been notified in writing of this change.	ete performance of my duties, and I a as provided for in Chapter 605, F.S. (m familiar with and Or, if this document is

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:

<u>Title</u>	Authorized Member Name	Address 2000 AUG 13 PM 6: 15	Toma of A 44
			Type of Action
MGR ———	Jean Philippe K. Quetant	5001 SW 20TH ST APT 1510	= Add
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			□Change
		-	□Add
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fective date, if other than the date of filin	ng:(optional)
n effective date is listed, the date must be specific an	id cannot be prior to date of filing or more than 90 days after filing A Pursuant to 605 020
cument's effective date on the Department of	meet the applicable statutory filing requirements, this date will not be listed as State's records.
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S filed.	ot an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the 2020
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