

L19000263346

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

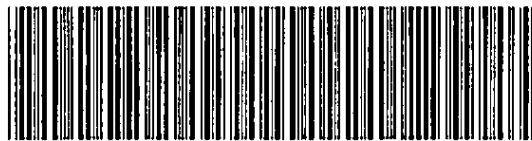
(Business Entity Name)

(Document Number)

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LLC
Append

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Quantum Natural Associates LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Boling
Name of Person

Firm/Company

8114 Villa Grand Court
Address

Sarasota, FL 34243
City/State and Zip Code

mike@QNA.org
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Boling at (941) 539-7878
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

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DIVISION OF CORPORATIONS
2020 JAN 28 PM 4:23

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Quantum Natural Associates "LLC"
(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 Company were filed on Oct 21, 2019 and assigned
Florida document number 619000263346

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."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2314 Whilfield Industrial Way
Sarasota, FL 34243

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:

Michael J. Boling Jr.

New Registered Office Address:

8114 Villa Grande Court

Enter Florida street address

Sarasota

City

Florida

34243

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>	<u>Type of Action</u>
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<u>AMBR</u>	<u>Bryan Mudge</u>	<u>3732 5th Ave West</u>	<input checked="" type="checkbox"/> Add
		<u>Palmetto, FL 34221</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

<u>AMBR</u>	<u>Paul Borromeo</u>	<u>4838 N. BENDER Ave</u>	<input checked="" type="checkbox"/> Add
		<u>Covina, CA 91724</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

<u>AMBR</u>	<u>Michael Boling</u>	<u>8114 Villa Grande Court</u>	<input checked="" type="checkbox"/> Add
		<u>Sarasota, FL 34243</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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[illegible]

(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 605.0207 (3)(b)

Dated 1-2-2020

MICHAEL B. B. B.
Typed or printed name of signee

Filing Fee: \$25.00