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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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TO:

| TO: Registration 5 Division of Co | | | | | |
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| COMPANY | GAL LLC | | | | |
| Name of Limited Liability Company | | | | | |
| The enclosed Articles of | of Amendment and fee(s) are sub | mitted for filing. | | | |
| Please return all corresp | oondence concerning this matter | to the following: | | | |
| | QASIM B MUSTASAM | | | | |
| | | Name of Person | | | |
| | Q B M LEGAL LLC | | | | |
| | | Firm/Company | | | |
| | 1426 SW 45TH WAY | | | | |
| | <u></u> | Address | | | |
| | DEERFIELD BEACH, FL | . 33442 | | | |
| | PIPOLINDO2009@LIVE.C | City/State and Zip Code | | | |
| | E-mail address: (| to be used for future annual report notifica- | ation) | | |
| For further information | concerning this matter, please c | all: | | | |
| QASIM B. MUSTASA | мM | 954 850-7885 | | | |
| Name | of Person | | elephone Number | | |
| 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) | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | | |
| Mailing Addr Registration | Section | Street Address: Registration Section | | | |
| Division of Corporations P.O. Box 6327 | | • | Division of Corporations The Centre of Tallahassee | | |
| Tallahassee, FL 32314 | | | 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 | | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

. 3 . 26

Q B M LEGAL LLC

2020/11 17 Aii 8:56

| (<u>Name of the Limited Liability Compa</u> (A Florida Limited | any as it now appears on our records.) Liability Company) |
|--|--|
| The Articles of Organization for this Limited Liability Company Florida document number L20000199264 | y were filed on $\frac{07/10/2020}{}$ and assigned |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liab | oility company here: |
| QBM LEGAL LLC | |
| The new name must be distinguishable and contain the words "Limited Liabi | ility Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 101 NE THIRD AVE SUITE 1500 |
| (Principal office address MUST BE A STREET ADDRESS) | FORT LAUDERDALE, FL 33301 |
| Enter new mailing address, if applicable: | 101 NE THIRD AVE SUITE 1500 |
| (Mailing address MAY BE A POST OFFICE BOX) | FORT LAUDERDALE, FL 33301 |
| B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: | |
| | 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 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 |
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| ote: If the date | f other than the date of filing: |
| ecord specifies is filed. | a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| ted | |
| | Signature of a member or authorized representative of a member |
| | QASIM B. MUSTASAM Typed or printed name of signee |

Filing Fee: \$25.00