120000362124

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP		MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	1
Certified Copies	_ Certificates	s of Status
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AUG 2'3 2022 S. PL ... Mr.

COVER LETTER

TO: Registration Section

Division of Cor	porations		
Qiezi, LLC			
SUBJECT:			•
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Sybil A. Smith		
		Name of Person	
	Qiezi, LLC		
		Firm/Company	
	17962 Lake Azure Way		
		Address	
	Boca Raton, FL 33496		
		City/State and Zip Code	
	sybil@sloanestephens.com		
	E-mail address: (to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	all:	
Sybil A. Smith		559 250-6393	
Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	ne 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 Addres		Street Address:	
Registration S		Registration S	
Division of C		Division of Co	•
P.O. Box 632		The Centre of	
Tallahassee, l	FL 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

77-

Qiezi, LLC		DEZ JUN	
(Name of the Limited Liabili	ity Company as it now appears on our records.)	<u> </u>	. ;
(A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	Sign 1	_
The Articles of Organization for this Limited Liability C Florida document number L20000362124	Company were filed on 11/25/20	andiassigned St. 41	ח ט
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	sited liability company here:		
The new name must be distinguishable and contain the words "Lin	nited 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 ADDI	DECC)		
(Frincipal Office address WOST DL A STREET ADDR			
Enter new mailing address, if applicable:			
•			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our records, <u>enter the nai</u>	ne of the new register	ered
agent and/or the new registered office address here.			
Name of New Registered Agent:		·	
New Registered Office Address:			
TIETHT INDICATE OF STATE OF ST	Enter Florida street address		
	TH 1.3		
	, Florida,	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>	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			Remove
			□ Change
			□Add
			□Remove
			□ Change
			
			Remove
			□Change
			□Add
			Remove
		·	Change
			□Add
			□Remove
			□Change

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fan effective date is listed, the date Note: If the date inserted in this	the date of filing: must be specific and cannot be prior s block does not meet the applic e Department of State's records.	to date of filing or more that able statutory filing req	ian 90 days after filing.) P	
	and offective date, but no	t an effective time	, at 12:01 a.m. or	the earlier of
				¥. ≥:
The 90th day after the r	ecord is filed.			2022 C
The 90th day after the r	ecord is filed.	<u> </u>		2022 JUN TALLAHAS
The 90th day after the r	ecord is filed.	-: L		2022 JUN -8 TALLAPASSE
ne record specifies a delay The 90th day after the r June 6 Dated	ecord is filed.	orized representative of a	member	2022 JUN -8 PM 5: 4 TALLAPASSEE FLORID