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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SIEGELAUB ROSENBERG P.A.

Account Number : 119990000058 : (954)753-2222 Phone Fax Number : (954)753-1123

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN QUANTITY AND QUALITY, LLC

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03/23/2021

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

QUANTITY AND QUALITY, LLC					
(Name of the Limited (A	Liability Comps Florida Limited	ny as it now appears on o Liability Company)	ur rocords.)		
The Articles of Organization for this Limited Liab Florida document number <u>L21000113672</u>	oility Company	were filed on 03/09/20	21	and assign	ned
This amendment is submitted to amend the follow	ring:				
A. If amending name, enter the new name of the	he limited liab	ility company here:			
QUANTITY AND QUALITY EXPRESS, LLC					
The new name must be distinguishable and contain the word	ds "Limited Liabi	lity Company," the designa	tion "LLC" or the abbr	eviation "L.L.C	
Enter new principal offices address, if applicab	le:	N/A			
Principal office address MUST BE A STREET.	ADDRESS)				202
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Enter new mailing address, if applicable:				न्तुं स्वर् १ र	ري
(Mailing address MAY BE A POST OFFICE BOX)					Pi 12
				- 151	N3
B. If amending the registered agent and/or reg agent and/or the new registered office address		address on our record	s, enter the name	of the new r	egiste
Name of New Registered Agent:	N/A		 -		
New Registered Office Address:		Enter Florida str	eet address		
			. Florida		
		City	, Fiorida	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.

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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
	N/A	<u> </u>	DAdd
			□Remove
			□Change
			□Add
			□ Remove
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			OAdd HAN 2e PH Cochange; 28
			D'Change;
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			Change
			⊡Add
			□ Remove
			□Change
			□Add

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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an effectiv	date, if other than the date of filing: ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Puthe date inserted in this block does not meet the applicable statutory filing requirements, this date will's effective date on the Department of State's records.	irsuant to 605.0207 (3 I not be listed as th
record sp	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90	0th day after the
	3/23/ 21	
ated	4 de	
	Signature of a member or authorized representative of a member	
	ETHEL IDACHKIN	