## L21000149316

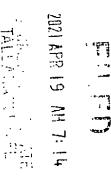
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D. BRUCE JUN 04 2021

## **COVER LETTER**

TO:	Registration Section Division of Corporations			v.		
SUBJE	CT: Q'PARRILLAZO LL		mited Liability Company			
The enc	closed Articles of Amendmer	nt and fee(s) are su	abmitted for filing.			
Please r	eturn all correspondence cor	scerning this matte	er to the following:			
	JOEL I	HRAKAH	Name of Person			
	O' PAF	RRILLAZO LLC	Nume of Crash			
			Firm/Company			
	2625 SW 75TH STREET APT 203 Address					
	<u>Gaini</u>	ESVILLE, FL 326	08 City/State and Zip Code			
	JHRAK	AH00@GMAIL.C E-mail address:		ofication)		
For furt	her information concerning t	his matter, please	call:		:	267
JOEL F	IRAKAH Name of Person	N-1, L	at <u>( 786 ) 740-5278</u> Area Code Daytim	ie Telephone Number	AL ALL	2021 APR 19
Enclose	d is a check for the following	g amount:				
<b>■</b> \$25		0 Filing Fee & ificate of Status	☐ S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

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

Q' PARRILLAZO LLC	
(A Florida Limited Liab	as in now appears on our records.)
Articles of Organization for this Limited Liability Company were filed on 03/31/2021 and assigned ida document number L21000149316 amendment is submitted to amend the following:  f amending name, enter the new name of the limited liability company here:  we name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC," or new principal offices address, if applicable:  Incipal office address MUST BE A STREET ADDRESS)  amending the registered agent and/or registered office address on our records, enter the name of the new registered t and/or the new registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address	
Florida document number <u>L21000149316</u> .	
This amendment is submitted to amend the following:	y Company were filed on 03/31/2021 and assigned  imited liability company here:  Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  DRESS)  cred office address on our records, enter the name of the new registered
and assigned a document number L21000149316  mendment is submitted to amend the following:  amending name, enter the new name of the limited liability company here:  we name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."  new principal offices address, if applicable:  input office address MUST BE A STREET ADDRESS)  mew mailing address, if applicable:  inguing address, if applicable:  inguing address MAY BE A POST OFFICE BOX)  amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered Agent:  Name of New Registered Agent:  New Registered Office Address:	
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)	202
_	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
_	
B. If amending the registered agent and/or registered office add agent and/or the new registered office address here:	ress on our records, enter the name of the new registere
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	es of Organization for this Limited Liability Company were filed on 03/31/2021 and assigned etument number L21000149316
	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 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
AMBR	DANIELA BERBEY	2625 SW 75TH STREET APT 203	□Add
		GAINESVILLE FL. 32608	□Remove
		"CHANGE THIS PERSON TO AMBR"	
			□Add
			□Remove
			□Change
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			CRemove 702
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ective date, if other to effective date is listed, the date inscribed cument's effective date	e date must be specific : in this block does no	and cannot be prior to t meet the applica	o date of filing or mo	(optio re than 90 days after requirements, this	nal)	5.02 ted
record specifies a delayed is filed.	l effective date, but i	not an effective tir	ne, at 12:01 a.m. o	n the earlier of: (b)	The 90th day afte	er tl
ated MARCH 14TH		. 2021	_ ·			
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Filing Fee: \$25.00