

121000330857

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

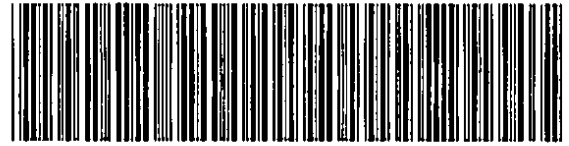
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2021 NOV 17 AM 12:03
SECRETARY OF STATE
FALL ARREST, FIVE

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: THE QUANTUM INVESTMENT GROUP, LLC.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

HUGO L. GARCIA, ESQ.

Name of Person

FLORIDA GENERAL COUNSEL, P.A.

Firm/Company

3401 NW 82ND AVENUE, SUITE 360

Address

DORAL, FLORIDA 33122

City/State and Zip Code

HGARCIA@GENERALCOUNSELFL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YAISSY LINARES

305 704-2500
at ()

Name of Person

Area Code

Daytime Telephone 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)

☐ \$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

FILED

2021 NOV 17 AM 12:04

SECRETARY OF STATE

~~SECRET~~
~~UNCLASSIFIED~~

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

3828 NW 2ND AVENUE

MIAMI, FLORIDA 33127

(Mailing address MAY BE A POST OFFICE BOX)

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

Civ'

Zip Code

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>
AR	CLINT LEMON	8995 NW 7TH AVENUE	<input type="checkbox"/> Add
		MIAMI FL 33150	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	HENRIK HARTVIG-LAURSEN	3828 NW 2ND AVENUE	<input checked="" type="checkbox"/> Add
		MIAMI FL 33127	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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

This image shows a single page from a notebook or ledger. It features ten evenly spaced, thin blue horizontal lines running across the width of the page. The margins are uniform on all sides. There is no handwriting, printed text, or other markings on the page.

E. Effective date, if other than the date of filing: _____ (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated OCTOBER 27TH, 2021

Signature of a member or authorized representative of a member

HUGO L. GARCIA, E-59.

Typed or printed name of signee

Filing Fee: \$25.00