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COVER LETTER

TO: Registr Divisio	ration Section n of Corporations	
QC	HLLC .	
SUBJECT:	Name (of Limited Liability Company
The enclosed Ar	ticles of Amendment and fee(s) an	re submitted for filing.
Please return all	correspondence concerning this n	natter to the following:
	Anastasia Negru	
	-	Name of Person
	QOH LLC	
		Firm/Company
	29629 forest glen dr	
		Address
	wesley chapel, fl, 335	. 43
	anastasia.on.gulica@gr	City/State and Zip Code mail.com
	E-mail addi	ress: (to be used for future annual report notification)
For further infor	mation concerning this matter, ple	ase call;
Anastasia Negru		813 8383400
	Name of Person	at () Area Code Daytime Telephone Number
Enclosed is a che	ck for the following amount:	
□ \$25,00 Filing	g Fee S30,00 Filing Fee & Certificate of Statu	

Mailing Address:

TO:

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

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on L21000340936	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the contains the contain the words "Limited Liability Company," the designation "LLC" or the contains the contains the words "Limited Liability Company," the designation "LLC" or the contains the contains the contains the words "Limited Liability Company," the designation "LLC" or the contains the contains the contains the words "Limited Liability Company," the designation "LLC" or the contains t	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered office address on our records, <u>enter the nar</u> gent and/or the new registered office address here:	ne of the new registe
Name of New Registered Agent:	2321 W.S.
New Registered Office Address:	
Enter Florida street address	(c)
, Florida	_ ; =
City:	Zip Code
ew Registered Agent's Signature, if changing Registered Agent:	్ట్

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>	Type of Action
president	Anastasia Negru	29629 forest glen dr.wesley chapel, fl. 33543	
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			□Remove
			□Change
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			□Remove
			□ Change

110	tive date, if other than the date of filing:
he reco	ord 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 filed.
	08/10/2021
Dated	·
	Da C Sel
	Allow II
	Signature of a member or authorized representative of a member

 $(x,y) = (y-1)^{-\frac{1}{2}}$