L21000397254

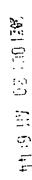
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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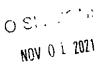
Office Use Only



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COVER LETTER

TO:	Registration S Division of Co				
elib iez	QuittaCare	LLC .			
SUBJEC		Name of Lin	nited Liability Company	···	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		LeQuitta Shorter			
			Name of Person		
		QuittaCare LLC			
			Firm/Company		
		249 EMERSON DR NW			
			Address		
		PALM BAY, FL 32907			
		MS.SHORTERL@YAHOO	City/State and Zip Code		
			to be used for future annual report no	otification)	
For furthe	er information e	concerning this matter, please c	all:		
LeQuitta	Shorter		321 527-6636		
	Name o	of Person		ime Telephone Number	
Enclosed	is a check for the	he following amount:			
□ \$2 5.0	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 Section		Registration S			
Division of Corporations P.O. Box 6327			Division of Corporations The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021 00 20 AN 6: 44

QuittaCare LLC				
(Name of the Limited L (A F	lability Company as it now a lorida Limited Liability Comp	ppears on our records.) any)	1	
The Articles of Organization for this Limited Liabil Florida document number L21000397254	lity Company were filed o	September 7th 2021	and assigned	
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liability compar	ıy here:		
The new name must be distinguishable and contain the words	"Limited Liability Company,"	the designation "LLC" or the ab	breviation "L.L.C."	
Enter new principal offices address, if applicable	e:			
(Principal office address MUST BE A STREET A	DDRESS)			
Enter new mailing address, if applicable:				
Mailing address MAY BE A POST OFFICE BOX	<u> </u>	· · · · · · · · · · · · · · · · · · ·		
		<u></u> .		
		_		
B. If amending the registered agent and/or regist agent and/or the new registered office address he	tered office address on o ere:	ur records, <u>enter the nam</u>	e of the new register	
				
Name of New Registered Agent:				
New Registered Office Address:				
New Registered Office Address.	Enter	r Florida street address		
	, Florida			
_	City		Zip Code	
New Registered Agent's Signature, if changing Regis	stered Agent:			
hereby accept the appointment as registered ag provisions of all statutes relative to the proper an accept the obligations of my position as registere being filed to merely reflect a change in the regis company has been notified in writing of this char	nd complete performanc ed agent as provided for stered office address, I h	e of my duties, and I am fo in Chapter 605, F.S. Or, i	imiliar with and If this document is	

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 00. 20 f.H 6: 44	Type of Action
AMBR	LeQuitta Shorter	249 Emerson Dr NW	🖼 Add
		Palm Bay, FL 32907	🗀 Кепюче
			□Change
MGR	Jamal Hudson	2340 Hickory Creek Rd	□Add
		Melbourne FL 32935	□Remove
			■Change
			[]Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗆 Add
			Петоче
			□Change
			□Add
			□Remove
			□Change

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Effective date, if other than the date of fil	ing:		(optional)	
If an effective date is listed, the date must be specific Note: If the date inserted in this block does not document's effective date on the Department of	t meet the applicable s	e of filing or more than tatutory filing requir	90 days after filing.) Pursu ements, this date will n	ant to 605,0207 of be listed as
e record specifies a delayed effective date, but ord is filed.	ot an effective time, a	t 12:01 a.m. on the e	arlier of: (b) The 90th	day after the
Dated				
	/			

Filing Fee: \$25.00

Typed or printed name of signee