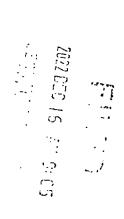


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: Registration Se Division of Cor			
QUALSER	RVICE LLC		•
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	NICARDO HAMILTON		
	<u> </u>	Name of Person	
	QUALSERVICE LLC		7
		Firm/Company	· 572
	1000 CROSSWINDS LA	NDING, APT F203	72050
		Address	5
	FORT WALTON BEACE	1, FL 32547	
		City/State and Zip Code	
	QUALSERVICELLC@GN		
	E-mail address: (to be used for future annual report noti:	fication)
For further information of	concerning this matter, please c	all:	
NICARDO HAMILTON	ı,	850 8129360 at ()	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he 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 tadditional copy is enclosed)
Mailing Address Registration !		Street Address: Registration Sec	ction
Division of Corporations		Division of Cor	porations
P.O. Box 632		The Centre of T	
Tallahassee,	r L 32314	2415 N. Monroe	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

QUALSERVICE LLC		
(<u>Name of the Limited Liability</u> (A Florida I	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 01-24-22	and assigned
Florida document number L22000042422	_·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		[2]
(Principal office address MUST BE A STREET ADDRI	ESS)	[]
		<u> </u>
Enter new mailing address, if applicable:		الربية في المسلم
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR WILMO	WILMOT G HUGGART	1000 CROSSWINDS LANDING, APT F203	
		FORT WALTON BEACH	≅Remove
		FL 32547	
			□ Add
			72 ☐ Remove
			— □Change
			
			□Remove
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ective date, if other than the date is effective date is listed, the date must be sp	e of filing: pecific and cannot be pri	ior to date of file	ing or more than 9	(option: 0 days after fili	ng.) Pursua	ant to 605	.02
te: If the date inserted in this block decument's effective date on the Departr			ry filing require	ments, this da	ite will no	ot be liste	ed
cord specifies a delayed effective date s filed.	:, but not an effective	e time, at 12:0	I a.m. on the ca	rlier of: (b)	The 90th	day after	r th
DECEMBER 13	. 2022						
ed							
	ature of a member or au	Ham	itor				