

L22000 489 810

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

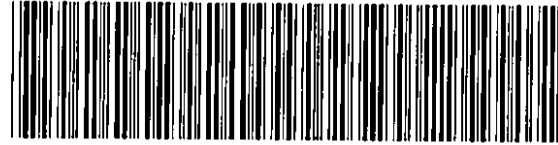
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800410688778

11/06/23--01002--012 **25.00

RECEIVED
2023 NOV -6 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2023 NOV 06 AM 10:39
11/11/2023

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BETHEA'S CAPITAL FINANCE, 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:

Qadeer Bethea

Name of Person

HQR Solutions Inc.

Firm/Company

3435 S Orange Ave APT K101

Address

Orlando, FL 32806

City/State and Zip Code

betheacapitalfinance@gmail.com

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

2023 NOV 06 AM 10:59
RECEIVED
TALLAHASSEE
FLORIDA

For further information concerning this matter, please call:

Name of Person at () Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BETHEA'S CAPITAL FINANCE, LLC

(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 11/16/2022 and assigned
Florida document number L22000489810.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

~~HQR Solutions~~ LLC

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:

3435 S Orange Ave APT k101

(Principal office address MUST BE A STREET ADDRESS)

Orlando, FL 32806

Enter new mailing address, if applicable:

3435 S Orange Ave APT k101

(Mailing address MAY BE A POST OFFICE BOX)

Orlando, FL 32806

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Qadeer Bethea

New Registered Office Address:

3435 S Orange Ave APT k101

Enter Florida street address

Orlando

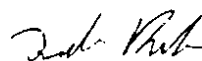
Florida 32806

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

_____ ☐ Change

2027 NOV 06 PM 10:59
JPL

2023 NOV 06 14:10:59

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.

Dated _____

Qadeer Bethea

Signature of a member or authorized representative of a member

Qadeer Bethea

Typed or printed name of signee

Filing Fee: \$25.00