L22000531048

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COVER LETTER

Registration Section Division of Corporations

TO:

TRANSQU	JALITY TRANSLATIONS LI	.C.	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Luciana Cirigliano		
		Name of Person	
	Transquality Translations	LLC	
		Firm/Company	
	18001 Old Cutler Road, S	uite 641	
		Address	
	Palmetto Bay, FL 33157		
		City/State and Zip Code	
	lucianacirig@gmail.com		
	E-mail address: (to be used for future annual report not	tification)
For further information c	concerning this matter, please c	ali:	
Diego Rodriguez		305 519-7292	
Name o	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	S30.00 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 Registration 9		Street Address: Registration Se	ection
Division of C	•	Division of Co	rporations
P.O. Box 632 Tallahassee.		The Centre of 2415 N. Monre	Tallahassee be Street, Suite 810
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Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Company as it now ap (A Florida Limited Liability Compa	pears on our records.) ny)	
The Articles of Organization for this Limited I Florida document number L22000531048	iability Company were filed on	December 20, 2022	and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability compan	y here:	
he new name must be distinguishable and contain the	words "Limited Liability Company," t	he designation "LLC" or the abl	oreviation "L.L.C."
Enter new principal offices address, if appli	cable:		_
Principal office address MUST BE A STRE	ET ADDRESS)		
inter new mailing address, if applicable:			202
Mailing address MAY BE A POST OFFICE	(BOX)		SS E
			10.7
			in-i Oi
. If amending the registered agent and/or		ir records, enter the name	
gent and/or the new registered office addre	ess nere:		10: 3 ₂
Name of New Registered Agent:	Diego Rodriguez		- 34
New Registered Office Address:	18001 Old Cutler Road, Suite	641	
The Wind Little Control of the Contr	Enter	Florida street address	
	Palmetto Bay	Florida 331	57
	Cim	Fiorida	Zin Code

New Registered Agent's Signature, if changing Registered Agent:

TRANSQUALITY TRANSLATIONS LLC

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 Agept, 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>	Address	Type of Action
MGR	Diego Rodriguez	18001 Old Cutler Road, Suite 641	■Add
		Palmetto Bay, FL 33157	□Remove
			DAdd
			Remove
			□Change
			□Add
			□Remove
			Change
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ffective date, if other than the date of an effective date is listed, the date must be spectore: If the date inserted in this block document's effective date on the Department.	ecific and cannot be prior to es not meet the applical	odate of filing or more t	han 90 days after fil	ing.) Pursuan	
record specifies a delayed effective date. Listified.	but not an effective tim	ie, at 12:01 a.m. on t	he earlier of: (b)	The 90th da	ay after the
September 11	2023				
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