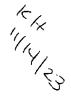
# L23000486689

(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



400418523994



WZJ NOV -6 PM 1: 13

### **COVER LETTER**

		3 V 151C 1515 I 1151C		
TO: Registration Se Division of Cor				4
SUBJECT:	QVCO G Son Name of Limited	L L C		
The enclosed Articles of	Amendment and fee(s) are submit	tted for filing.		
Please return all correspo	ndence concerning this matter to	the following:		
	Evgene +	Name of Person		
	Leves ?	Son 11C		
	1222 Ta	Ylor St Address	#()	
	Aurborndala	2 7L 3399 City/State and Zip Code	13	
	ESES 470 E-mail address: (to b	be used for future annual report notifi	ication)	
For further information c	oncerning this matter, please call:			
Logene o	Person Sc.	at ( <u>\$63</u> ) <u>O1 3</u> Area Code Daytime	SECTION NO. 1 Telephone Number LL NA. 2023 NO. 4 - 6	
Enclosed is a check for the	ne following amount:		SSE P	Ti O
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	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

(A Florida I	Limited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number 12300 4866	• •
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 the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4
(Principal office address MUST BE A STREET ADDRE	ESS)
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	ZOZ3 NOV -6 PH SECRITATION -6 PH SECRITATION -6 PH
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the name of the new registered
Name of New Registered Agent:  New Registered Office Address:	Ochene Harry Levy Sr. 22 Taylor 31 H(0) Enter Florida street address
A)	burndale, Florida 33823  Zip Code
New Pagistared 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, enter the title, name, and address of each person—being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Remove
		-	□Change
			□Add
		□Remove	
			□Change
			Remove OChange
			Change Ch
			□ Change
	<del></del>		
			□Remove
			□Change
			□Remove
			Change

amending any other information, enter change(s) here: (Attach additional sheets, if n	ecessary.)
	202 SE
	SECTION SECTION
	Central Central
	SEE
	ED :
	Η ω
E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90  Note: If the date inserted in this block does not meet the applicable statutory filing requirer document's effective date on the Department of State's records.	
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ear	mer or. (o)
record is filed.	
Dated October 29 2023	
Signature of a member or authorized representative of a men	mber
5	