Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REX LEGAL LLC Account Number : I20210000159 : (786)491-4307 : (786)373-3250 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **QBIC 2030 LLC**



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K. SALY

NOV - 8 2024

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TO:

Registration Section

COVER LETTER

Division of Co	rporations		
QBIC 2030	LLC		
SUBJECT:	Name of Lin	nited 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:	
	GEORGE JOVANOVIC		
		Name of Person	
	REX LEGAL LLC		
		Firm/Company	·····
	Name of Limited Liability Company es of Amendment and fee(s) are submitted for filing. respondence concerning this matter to the following: GEORGE JOVANOVIC Name of Person REX LEGAL LLC Firm*Company 66 W FLAGLER ST. SUITE 900 Address MIAMI, FL 33130 City/State and Zip Code INFO@REXLEGAL.COM E-mail address: (to be used for future annual report notification) ion concerning this matter, please call: OVIC at (T86 Area Code Daytime Telephone Number for the following amount: the S30.00 Filing Fee & Certificate of Status Certificate of Status Certificate Copy (additional copy is enclosed) dress: on Section Registration Section Division of Corporations		
		Address	filing. owing: ne of Person Address The and Zip Code for future annual report notification) The and Zip Code The annual report notification) The annual report notification of status and status a
	MIAMI, FL 33130		
	<u></u>	City/State and Zip Code	
			infication)
For further information of	concerning this matter, please c	all:	
GEORGE JOVANOVIO			
Name o	of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Addres			ection
-		Division of Co	rporations
P.O. Box 632			
Tallahassee, l	FL 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2024 NOV -7 PM 3: 04
SECRETARY OF STALLAHASSEE FLATORE

QBIC 2030 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Afficies of Organization for this Emilied Elability Company	were filed on and assigned		
Florida document number L24000043448	were med on and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil			
Enter new principal offices address, if applicable:	11840 SW 42 Place Apt # 335		
(Principal office address MUST BE A STREET ADDRESS)	Miramar, FL 33025		
	USA		
	11840 SW 42 Place Apt # 335		
Enter new mailing address, if applicable:	Miramar, FL 33025		
(Mailing address MAY BE A POST OFFICE BOX)	USA		
	038		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:			
Name of New Registered Agent:			
Name of New Registered Agent: New Registered Office Address:	Enter Florida street address		
	Enter Florida street address, Florida City Zip Code		
New Registered Office Address:			
•	Florida Zip Code Zip Code ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is		

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
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			□ Change
			TALL SECTION
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			□Change
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ective date, if other than the date effective date is listed, the date must be te: If the date inserted in this block nument's effective date on the Department.	does not meet the appli	cable statutory filing	(option ore than 90 days after fit g requirements, this d	al) ing.) Pursuant to 60: ate will not be list	5.0207 (3)(b) ed as the
cord specifies a delayed effective da s filed.	te, but not an effective	time, at 12:01 a.m. (on the earlier of: (b)	The 90th day afte	r the
ed NOVEMBER, 7TH	. 2024	·			
<i>A</i>	Jovanovic nagare of a member or auth				
Sign	pare of a member or auth	norized representative	of a member		

Filing Fee: \$25.00