

To:

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2024-10-24 06:09:07 UTC-14

18506176383

From: ZenBusiness User

10/23/24, 12:05 PM

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

H24000353577 3

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.

((H24000353577 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC.

Account Number : I20230000190

Phone : (844)449-3624

Fax Number : (512)597-0678

**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
QUILICHINI MANAGEMENT LLC

Certificate of Status	0
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T. LEMIEUX

OCT 23 2024

Electronic Filing Menu

Corporate Filing Menu

Help

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

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To:

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Johannie Dengreville	405 s pine island road	☒ Add
		Plantation , FL 33324	☐ Remove
			☐ Change
MGR	Johannie Dengreville	405 s pine island road	☒ Add
		Plantation , FL 33324	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

Business Purpose : Catering, hospitality, private event, bartending.

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