

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.

(((H25000006489 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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 QUALITY SERVICES AND SUPPLIES LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

Page: 2 of 4

To

18506176383 2025-01-07 11:54:18 UTC÷14 ARTICLES OF AMENDMENT

TO ARTICLES OF ORGANIZATION

OF

From: ZenBusiness User

Quality Services and Supplies LLC		
(<u>Name of the Limite</u> (d Liability Company as it now appears on our reco A Florida Limited Liability Company)	<u>((ds.</u>)
The Articles of Organization for this Limited Lia Florida document number 124000356155		and assigned
This amendment is submitted to amend the follow	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and contain the wo		LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:	
(Principal office address MUST BE A STREET	<u> (ADDRESS)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>	
B. If amending the registered agent and/or reagent and/or the new registered office address		er the name of the new registered
Name of New Registered Agent:		13
New Registered Office Address:	Enter Florida street addr	© 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
	,1	lorida
	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

ı		ŕ	ŧ	4	
ı			ı		

Page: 3 of 4 2025-01-07 11:54:18 UTC+14 18506176383 From: ZenBusiness User in amenoning 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
			[_]Add
		····· - · · · · · · · · · · · · · · · ·	□Remove
		 	
			□Remove
		4	□Change
	***************************************	Manage of the second se	□∧dd
			⊟Remove
			UChange
			FiAdd
			□Remove
			□Change
			UAdd
			i*[Remove
			□(Change
			□Add
			□Remove
			("iChange

TEASHA'S BAKER

From: ZenBusiness User

Electronic Signature must l	oe updated to: IEAS	SHA'S BAKER			

#8 #8 #8 #8 # # # # # # # # # # # # # #					

		.			
fective date, if other than th	e date of filing:			(optional)	
fective date, if other than the orfective date is listed, the date in					
ote: If the date inserted in this locument's effective date on the.			latutory liling rec	jurrements, this date	will not be listed a:
	·				
ecord specifies a delayed effect is filed.	ive date, but not an	effective time, a	: 12;01 a.m. on th	e earlier of: (b) The	90th day after the
January 6th ited	· 2	:025 			
		IEASHASE			

Typed or printed name of signee