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Division of Corporations

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Account Name : RC TAX SERVICE LLC

Account Number : 120140000083

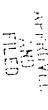
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inter the email address for this business entity to be used for future Tannual report mailings. Enter only one cmail address please.**

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SE LLC AMND/RESTATE/CORRECT OR M/MG RESIGN QUIJOTE SERVICE, LLC

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TO:

Registration Section

Tallahassee, FL 32314

Page: 2 of 5

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COVER LETTER

porations				
SERVICE, LLC				
Name of Limit	ed Liability Company			
Amendment and fee(s) are sub-	nitted for filing.			
ndence concerning this matter :	o the following:			
MIGUEL QUILON				
	Name of Person			
QUIJOTE SERVICE, LLC				
	Firm/Company			
423 MISSISSIPPI AVE				
	Addiess			
SAINT CLOUD, FL 34769)			
CHINOPERPARENTICE CONT.	City/State and Zip Code			
		ification)		
	407 346-6448			
of Person	Area Code Daytin	ne Telephone Number		
the following amount:				
☐ \$30.00 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 Address: Registration Section Division of Corporations P.O. Box 6327		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Momoe Street, Suite 810		
	Amendment and fee(s) are submodence concerning this matter: MIGUEL QUILON QUIJOTE SERVICE, LLC 423 MISSISSIPPI AVE SAINT CLOUD, FL 34769 QUIJOTESERVICE@GM/ E-mail address: (concerning this matter, please concerning this matter, please concerning this matter, please concerning this matter, please concerning this matter.	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: MIGUEL QUILON Name of Person QUIJOTE SERVICE, LLC Firm/Company 423 MISSISSIPPI AVE Address SAINT CLOUD, FL 34769 City/State and Zip Code QUIJOTESERVICE@GMAIL.COM E-mail address: (to be used for future annual report not concerning this matter, please call: Area Code Area Code Daytin the following amount: S \$30.00 Filing Fee & Certified Copy (additional copy is enclosed) Section Corporations Street Address: Section Corporations 10 Division of Company		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

QUIJOTE SERVICE, LLC					
Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our rebility Company)	<u>:cord<u>s.</u>)</u>			
The Articles of Organization for this Limited Liability Company we Florida document number $\frac{L24000377000}{L24000377000}$	rere filed on <u>04/30/2024</u>	<u></u> -	and	assign	ed
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabili	ity company here:				
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation	"LLC" or the	abbreviatio	n "L.L.C	× 18
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRESS)					
		·			
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)		······································			·
B. If amending the registered agent and/or registered office a ngent and/or the new registered office address here:	ddress on our records,	enter the m	ime of th	е пем 1	<u>registered</u>
				202	
Name of New Registered Agent:				2025 HAY	
New Registered Office Address:				- 	<u></u>
West Registered States	Enter Florida street	address		83	三岩岩
		Florida	 	<u> </u>	
	Ciņ		— XIII	C.	`
New Registered Agent's Signature, if changing Registered Agent:			• •	9	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as feing filed to merely reflect a change in the registered office company has been notified in writing of this change.	-perjormance of my avi- provided for in Chapter	- 505, F.S. (Dr, if this	docw	nent is

14075205473

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

Title	<u>Name</u>	Address	Type of Action
AMBR	BEATO MACHADO, ABRAHAM	11148 EINBENDER RD	Cladd
		ORLANDO, FL 32825	
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			☐ Change
			b5A□
			□Remove
			ClChange
			∐Remove
			(TChange
			□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□
			[]Remove
			[] Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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					75.437.5
<u> </u>			 ·		
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• · · · · · · · · · · · · · · · · · · ·			 -	-	
 					
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. Effective date, if other than (If an effective date is listed, the dat Note: If the date inserted in the document's effective date on the	ns block does not an	cet the applicable :	e of filing or more thi starutory filing requ	an 90 days efter filing.) uirements, this date v	Pursuant to 605,0207 (3)(will not be listed as the
The record specifies a delayed of ecord is filed.	fective date, but not a	an effective time. :	at 12:61 a.m. on the	e earlier of: (b) - Tha	e 90th day after the
MAY 21		2025			
Dated MAY 21	يرز	AX	2		
	\mathcal{L}_{i}	A.JA).	amen's		
	-Simplify 2010 10	number of luther 170	t representative of a	member	
	Signing in				
MIGUEL QUILO	N				

Typud or printed name of signee