



Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : GLOBAL ACCOUNTING AND TAX PROFESSIONAL CORP
Account Number : I20140000098
Phone : (786)372-1391
Fax Number : (786)762-2589

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
QUAYVA LLC

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

2024 SEP 20 PM 12:13

FILED

COVER LETTER

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TO: Registration Section
Division of Corporations

QUAYVA LLC

SUBJECT:

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:

Surely Molina
Name of Person

Global Accounting and tax professional corp
Firm/Company

7500 ntw 25th street suite 246
Address

Miami Florida
City/State and Zip Code

smolina@globalaccountingusa.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Surely Molina
305
640-5951
Area Code
at
Name of Person
Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee
☐ \$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
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2 3 6960 44

W211:5 4202 02 448.

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H240003215853

QUAYVA LLC

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

The Articles of Organization for this Limited Liability Company were filed on 09/12/2024 and assigned
Florida document number L24000399614.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NA

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

7500 NW 25th Street Suite 246

(Principal office address MUST BE A STREET ADDRESS)

Miami Florida 33122

Enter new mailing address, if applicable:

7500 NW 25th Street Suite 246

(Mailing address MAY BE A POST OFFICE BOX)

Miami Florida 33122

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

NA

New Registered Office Address:

NA

Enter Florida street address

NA

, Florida

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	VASILADIS, GUADALUPE	7411 BRIGANTINE LN	<input type="checkbox"/> Add
		PARKLAND, FL 33067	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Surely Molina	7500 NW 25th Street Suite 246	<input checked="" type="checkbox"/> Add
		Miami Florida 33122	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	QUAINI, JUAN M	7500 NW 25th Street Suite 246	<input type="checkbox"/> Add
		Miami Fl 33122	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Dated 09/20, 2024

Signature of a member or authorized representative of a member

Typed or printed name of signee