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

From:
Account Name : EXPRESS ACCOUNTING MANAGER
Account Number : I20210000189
Phone : (760)349-8865
Fax Number : (954)301-6257

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

Email Address: expressams314@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
QOD AMERICA LLC

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NOV 25 2024

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: QOD AMERICA LLC

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:

FERNANDO MELO

Name of Person

QOD AMERICA LLC

Firm/Company

1645 PALM BEACH LAKES BLVD, FLOOR 12, STE 1200

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

expressams314@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FERNANDO MELO

760

349-8865

at (_____) _____

Name of Person

Area Code

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

QOD AMERICA 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 September 20, 2024 and assigned
Florida document number 124000411626.

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

1645 PALM BEACH LAKES BLVD. FLOOR 12, STE 1200
WEST PALM BEACH, FL 33401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1645 PALM BEACH LAKES BLVD. FLOOR 12, STE 1200
WEST PALM BEACH, FL 33401

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:

REGISTERED AGENTS INC

New Registered Office Address:

7901 4TH ST N STE 300

Enter Florida street address

ST. PETERSBURG

City

Florida

33702

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:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	FERNANDO MELO	13835 TYBEE BEACH LN, ORLANDO, FL 32827	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	FERNANDO MELO	1645 PALM BEACH LAKES BLVD, FLOOR 12	<input checked="" type="checkbox"/> Add
		STE 1200, WEST PALM BEACH, FL 33401	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	FERNANDO MELO	1645 PALM BEACH LAKES BLVD, FLOOR 12	<input checked="" type="checkbox"/> Add
		STE 1200, WEST PALM BEACH, FL 33401	<input type="checkbox"/> Remove
			<input 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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of (b) The 90th day after the record is filed.

2024

FERNANDO MELO

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