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Division of Corporations

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From:

Account Name : EXPRESS ACCOUNTING MANAGER

Account Number : I20210000189 Phone : (760)349-8865 Fax Number : (888)527-9343

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

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DEC - 6 2024

COVER LETTER

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CHOLDER	QOD AME	RICA LLC		
SUBJECT		Name of Lim	ited Liability Company	······································
The enclose	Part of Limited Liability Company Inclosed Articles of Amendment and fee(s) are submitted for filing. Inclosed Articles of Amendment and fee(s) are submitted for filing. FERNANDO MELO Name of Person			
Please retur	n all correspo	ondence concerning this matter	to the following:	
		***************************************	Name of Person	
		QOD AMERICA LLC		
			Firm/Company	
		1645 PALM BEACH LAR	KES BLVD, FLOOR 12, STE 1200	
			Address	
		WEST PALM BEACH, FI	L 33401	
		expressains314@gmail.com	•	
				
For further	information c	oncerning this matter, please c	all:	
FERNAND	OO MELO			
	Name o	t Person	Area Code Daytime Telephon	e Number
Enclosed is	a check for the	he following amount:		
₩ \$25.00	Filing Fee		Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
Re Di P.	egistration :	Section Corporations 27		ee

From Ivis Diaz 1.888.527.9343 Thu Dec 5 11:37:52 2024 EST Page 3 of 5

ARTICLES OF AMENDMENT

TO

TES OF ORGANIZATION

2024 DEC -5 PH 3: 32

ALLAMASSEL FLORID.

OOD AMERICA LLC

company has been notified in writing of this change.

(Name of the Limited Liability (A Florida L	Company as it now appears on imited Liability Company)	$\frac{\sum U_R f_{Q_i} }{\sum e^{-C_i C_i}}$
The Articles of Organization for this Limited Liability Co Florida document number £24000411626		per 20, 2024 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u></u>	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our recor	ds, enter the name of the new registe
agent and/or the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida st	reet address
 -	Cin:	, Florida Zip Code
New Registered Agent's Signature, if changing Registered	•	гар соце
I hereby accept the appointment as registered agent at		aire. I faethar agree to comply with
provisions of all statutes relative to the proper and coi	mplete performance of my c	luties, and I am familiar with and
accept the obligations of my position as registered ago being filed to merely reflect a change in the registered		

If Changing Registered Agent, Signature of New Registered Agent

From Ivis Diaz 1.888.527.9343 Thu Dec 5 11:37:52 2024 EST Page 4 of 5

If amending Authorized Person(s) authorized to manage, enter the fitle, 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
AMBR	TAMELLA MELO	1645 PALM BEACH LAKES BLVD, FLOOR 12	= Add
		STE 1200, WEST PALM BEACH, FL 33401	□Remove
			□Change
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record specifies a delayed effective	date, but not an effective time	, at 12:01 a.m. on the	earlier of: (b) Th	e 90th day after the
is filed.	/)	n		
DECEMBER 3th	2024	у		
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