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To:

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

From:

Account Name : C T CORPORATION SYSTEM

Addount Number: FCA000000023 Fnone: (954)208-0845 Fax Number: (614)573-3996

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

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **QC ENERGY RESOURCES, LLC**

Certificate of Status	0
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Help

K. SALY NUV - 9 2022

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

SECTION 1 (1	1-4 must be completed)			~
Name of limited liability Company as it appears on     State:      QC Energy Resources, LLC			6	
				FILE 84.5:04
			·	Ž
2. The Florida document number of this limited liabilit		06827		
3. Jurisdiction of its organization: Delaware  4. Date authorized to do business in Florida: 09/19/20  SECTION II (5-9 complete only the applicable charts). New name of the limited liability company: QC W (must contact).	nges)		<del></del>	
(If name unavailable, enter alternate name adopted for copy of the written consent of the managers or managi must contain "Limited Liability Company," "L.L.C." of	ng members adopting the	g business in Florida alternate name. The	and attach a afternate name	
6. If amending the registered agent and/or registered of registered agent and/or the new registered of fice addre	fficer address on our reco <u>ss here:</u>	irds, <u>enter the name o</u>	of the new	
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·			
New Registered Office Address:	Enter Flor	rida Street Address		
	City	Florida <u></u> 	p Code	
New Registered Agent's Signature, if changing Register	ered Agent:			

Thereby 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  $\hat{l}$  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. Thereby confirm that the limited liability company has been notified in writing of this change.

To:

Page: 4 of 5

3. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:					
tle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Actio		
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Auached is a certif	icate, if required; no more than 9	0 days old, evidencing the	□Rem		
aforementioned am	endment(s), duly authenticated be he law of which this enalty is org	by the official having custody of records in the anized.	e		
	Signature o	Tthe authorized representative			

Filing Fee: \$25.00

## <u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'QC ENERGY RESOURCES,

LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'QC

WEST, LLC' ON THE FOURTEENTH DAY OF JULY, A.D. 2022, AT 3:26

O'CLOCK P.M.





4848787 8320 SR# 20223954448 Authentication: 204795609

Date: 11-07-22