

*Florida*

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H17000247784 3)))



H170002477843ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6380

*Nachay*  
*OCT 02 2017*

From: Account Name : REGISTERED AGENT SOLUTIONS INC  
Account Number : I20100000062  
Phone : (888)705-7274  
Fax Number : (888)706-7274

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

Email Address: \_\_\_\_\_

REGISTERED AGENT CHANGE  
GUILDQUALITY INC.

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$35.00 |

2017 SEP 29 PM 2:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

17 SEP 29 AM 10:22

FILED



Enter the Fax Audit Number Here

H17000247784 3

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: GUILDQUALITY INC.  
Name of Corporation

DOCUMENT NUMBER: F17000003312

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Mary Castillo  
Name of Contact Person

Registered Agent Solutions, Inc.  
Firm/Company

1701 Directors Blvd, Ste 300  
Address

Austin, TX 78744  
City/State and Zip Code

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

For further information concerning this matter, please call:

Mary Castillo at ( 888 ) 705-7274  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FLH17000247784 3

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT FOR  
BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of South Carolina in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: GUILDQUALITY INC.
- 2. The principal office address: 225 OTTLEY DR SUITE 200  
ATLANTA, GA 30324
- 3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 07/25/2017 Document number: F17000003312

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

PARACORP INCORPORATED  
155 OFFICE PLAZA DR, 1ST FLOOR  
TALLAHASSEE, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Registered Agent Solutions, Inc.  
155 Office Plaza Dr., Suite A  
P.O. Box NOT acceptable  
Tallahassee, FL 32301

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

17 SEP 29 AM 10:22

FILED

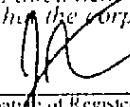
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

/s/ Marc Thompson  
Signature of an officer or director

Marc Thompson CFO  
Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
Signature of Registered Agent

09/20/2017  
Date

If signing on behalf of an entity:

Justine Karnell - Assistant Secretary  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 H17000247784 3