

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000058041

**Entity Name:** QUALITY EXPERTS TRANSPORTATION, LLC

**Current Principal Place of Business:**

21 UTILITY DRIVE, SUITE D  
PALM COAST, FL 32137

**Current Mailing Address:**

21 UTILITY DRIVE, SUITE D  
PALM COAST, FL 32137

**FEI Number:** 26-0468127

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHIUMENTO, MICHAEL DIII  
CHIUMENTO, GUNTARP & SELIS, PL  
145 CITY PLACE, SUITE 301  
PALM COAST, FL 32164 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	DUREN, VERA	Name	MACHKIN, IVAN
Address	2148 S. SORRENTO HILLS RD	Address	9 BARKWOOD LN
City-State-Zip:	ST. AUGUSTINE FL 32092	City-State-Zip:	PALM COAST FL 32137

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** VERA DUREN

**MANAGER**

**04/21/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date