

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000040061

**Entity Name:** QLM LEASING, LLC

**Current Principal Place of Business:**

4035 WEST 1ST AVENUE  
SANFORD, FL 32771

**Current Mailing Address:**

PO BOX 471207  
LAKE MONROE, FL 32747

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

GROOMES, SHAWN  
901 DOUGLAS AVE  
SUITE 206  
ALTAMONTE SPRINGS, FL 32714 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  
Name MARK LANG REVOCABLE TRUST  
Address 4035 WEST 1ST AVENUE  
City-State-Zip: SANFORD FL 32771

Title MGR  
Name CRYSTAL LANG REVOCABLE  
Address 4035 WEST 1ST AVENUE  
City-State-Zip: SANFORD FL 32771

*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:** MARK LANG REVOCABLE TRUST

**MANAGER**

**03/23/2018**

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

\_\_\_\_\_  
Date