

Electronic Filing Cover Sheet

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Division of Corporations

Fax Number

: (850)617-6380

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Phone

Fax Number

: (850)878~5926

REGISTERED AGENT CHANGE

QQAGENCY, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | .0 |
| Page Count | 02 |
| Estimated Charge | \$35.00 |

Electronic Filing Menu

Corporate Filing Menu

2/14/2008

https://efile.sunbiz.org/scripts/efilcovr.exe

CT CORPORATION SYSTM

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05/14/5008 15:21

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

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statu inge is submitted for a corporation organized under the laws of the State of Delay or to change its registered office or registered agent, or both, in the State of Florid | vare | |
|----------------------------------|--|--------|------------|
| 1. The name of t | the corporation; QQAGENCY, INC. | | |
| 2. The principal | office address: 250 EAST FIFTH STREET CINCINNATI OH 45202 | | _ |
| 3. The mailing a | ddress (if different): | | <u>-</u> |
| 4. Date of incorp | poration/qualification: 12/15/2000 Document number: F00000007055 | | |
| | street address of the current registered agent and registered office on file with the tracht of State; | | |
| | CORPORATION SERVICE COMPANY | ! | |
| | 1201 HAYS STREET TALLAHASSEE FL 32301-2525 | ı | |
| 6. The name and (if changed): | street address of the new registered agent (if changed) and /or registered office | 08 FEB | C+ 1.0.000 |
| | C T Corporation System | 7 | 2 |
| , | c/c C T Corporation System, 1200 South Pine Island Road (P.O. Box NOTucceptable) | 79.1 | |
| | Plantation, Florida 33324 | 13 | |
| | ss of its registered office and the street address of the business office of its region identical. | , | |
| (4 | s authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change. Billy Hill PV-Cicle of directory Frinke or types name and title? | | |
| ., • | ted in officer or duction) the appointment as registered agent and agree to act in this capacity. It comply with the provisions of all statutes relative to the proper and complete if am familiar with and accept the obligation of my position as registered age g filed merely to reflect a change in the registered office address, I hereby content in writing of this change. | | |
| By: Aller | Corporation System 2/13/2006 | | |
| f signing on beh | alf of an entity: A. Wallace | | |
| Assiek | ant/Secretaly | | |
| | * * * FILING FEE: \$35.00 * * * | | |
| MAI 3R2E045 (8/05) | Make Checks payable to Plurida Department of State il to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 | | |

02/14/2008 12:51 8508785926

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