F0400002798

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





200057311932

07/15/05--01031--004 **35.00

OS JUL IS AMIL: OX

M RA

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: QUALITY UENDING OF South Carolina, Inc. (Name of Corporation)
DOCUMENT NUMBER: FO 400000 2798
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:
ROBERT L HETZEL (Name of contact person)
GUALITY VEWS OF S.C., INC (Firm/Company)
S739 CORPORATION CR. (Address)
(City/state and zip code)
For further information concerning this matter, please call:
Marilym GLOW at (239) 694-3070 (Name of contact person) at (239) 694-3070 (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 409 E. Gaines Street Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR 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 Florida.	
1. The name of the corporation: Quality vending of south Carolina, Inc. 2. The principal office address: 5739 CORPORH Trow CR	
2. The principal office address: 5739 CORPORATION CR TMYERS, FL 33905	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 5-18-64 Document number: FO400000017 9 8	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
CT CORPORATION SYSTEM	
1700 South PIDE ISLANDA PL SE TI	
PLANTATION FL 33324 55 5	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): ROBERT LHETZEL	
ROBERT LHETZEL ST 3	
5739 CORPORATION CR (P.O. Box NOT acceptable)	
FT MYERS, FL 33905	
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.	
COSE LT L HETZE L CLINE IN (Signature of an officer or director) Conserve of an officer or director)	<u>)</u>
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 Reference Agent)	
If signing on behalf of an entity:	
ROBERT L. HETZEL (Typod or Printed Name)	

* * * FILING FEE: \$35.00 * *