## F14000005362

(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:			
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
	OVE OUE ING	
SUBJ	ECT: QUE QUE INC	
Name	of Corporation	
DOCI	UMENT NUMBER: F14000005302	
The er	nclosed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.
	return all correspondence concerning thi	-
1 icase	return an correspondence concerning un	is matter to the following.
James	Lee	
Name	of Contact Person	
QUE (	QUE INC	
Firm/0	Company	
814 Lo	orenza Pl	
Addre	SS	
Rockle	edge, FL 32955	
City/S	tate and Zip Code	
	jlee@simpleque.com	
E-mai	il address: (to be used for future annua	al report notification)
For fu	rther information concerning this matter,	please call:
James	Lee	ot (937 \ \546-2464
	Name of Contact Person	at (937 ) 546-2464 Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the	e Department of State.
	Mailing Address:	Street Address:
	Amendment Section	Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation orga	v2, 607.1308, or 617.1308, Florida Statutes, this nized under the laws of the State of Florida tered agent, or both, in the State of Florida.	
1. The name of t	he corporation: QUE QUE INC		
	office address: 814 Lorenza Pl		_
3. The mailing a	ddress (if different):		_
4. Date of incorp	poration/qualification: 12/15/2014	Document number: F14000005302	
	street address of the current registered a tment of State: (If resigned, enter resign	agent and registered office on file with the ed)	
	James A Lee	20 <b>20</b>	
	2747 Spur Dr	2023 AUG - 7 SECRETAR TALLAH	-77
	Viera, FL 32940	ARR 1	ESPECIAL PROPERTY OF THE PROPE
6. The name and (if changed);	street address of the new registered age	ent (if changed) and /or registered office 9. 9. 75 TATE	
	James A Lee	ATE	
	814 Lorenza Pl		
	ox NOT acceptable		
	Rockledge, FL 32955		
The street addre	ess of its registered office and the street be identical.	address of the business office of its registered age	nt,
Such change wa authorized by th	is authorized by resolution duly adopte the board, or the corporation has been no	d by its board of directors or by an officer so of the change.	
Lann	Alex	James A Lee	
l further agree t of my duties, an document is bei	d I am familiar with and accept the obt	tutes relative to the proper and complete performa ligation of my position as registered agent. Or, if t he registered office address, I hereby confirm that t	his
$\mathcal{A}$		8/1/2023	
Sign	nature of Registered Agent	Date	_
If signing on bel	half of an entity:		
ту	ped or Printed Name		

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