

Jon Charles Thomas II
Requester's Name

1522 Colonial Drive
Address

Tallahassee, FL 32303 228-3454
City/State/Zip Phone #

L01000004852
Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Quest Services, LLC L01000004852
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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-04/19/01--01038--001
*****25.00 *****25.00

- Walk in
- Pick up time
- Certified Copy
- Mail out
- Will wait
- Photocopy
- Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

OTHER FILINGS

- Annual Report
- Fictitious Name

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Direct
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

RECEIVED
01 APR 19 AM 9:19
CORPORATION DIVISION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 APR 19 AM 9:19

APPROVED
AND
FILED

Examiner's Initials JD

4-19-01

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the limited liability company is: Quest Services, LLC
2. The mailing address of the limited liability company is: 3512 Maclay Blvd, Suite 102 Tallahassee, FLA 32312

- 3. Date of filing/registration in Florida: March 29, 2001
4. Document number: L01000004852

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

TOM EDWARDS
Name
1534 Golf Terrace Dr
Address
Tallahassee, FLA 32301
City, State and Zip

6. The name and address of the new registered agent and/or office:

Jon Charles Thomas II
Name
1522 Colonial Drive
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32303
City, State and Zip

APPROVED AND FILED
01 APR 19 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature of Tom Edwards]

(Signature of a member or authorized representative of a member)

Tom Edwards

(Printed or typed name of signee)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature of Registered Agent]

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314