

Mar 07 06 11:18a

Division of Corporations

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W040000014099

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : SMALL BUSINESS RESOURCES USA, INC.
Account Number : I20040000173
Phone : (407)298-4646
Fax Number : (407)297-0588

W04-14099

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

VOLUSIA QUALITY HOMES, LLC

Certificate of Status	0
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TALLAHASSEE FLORIDA

VOLUSIA QUALITY HOMES, LLC

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FAX AUDIT# H 060000586963

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Volusia Quality Homes, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

James K. Duerr, CPA
(Name of Person)

Small Business Resources USA, Inc.
(Firm/Company)

773 S. Kirkman Rd., Ste. 118
(Address)

Orlando, FL 32811
(City/State and Zip Code)

For further information concerning this matter, please call:

James K. Duerr, CPA at (407) 298-4646
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 5327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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3/7/2006 8:33 FAXE 0017001 FLORIDA Dept Of State

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March 7, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

VOLUSIA QUALITY HOMES, LLC
P.O. BOX 740986
ORANGE CITY, FL 32774-0986US

SUBJECT: VOLUSIA QUALITY HOMES, LLC
REF: L04000014099

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please sign and refax the Change of Registered Agent form only, the amendment form is not needed.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges
Document Specialist

FAX Aud. #: H06000058696
Letter Number: 906A00015733

RECEIVED
06 MAR -7 AM 10:23
DIVISION OF CORPORATION

P.O BOX 6327 - Tallahassee, Florida 32314

Mar 07 06 11:18a

FAX AUDIT # H 06000058696 3 P.5

**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: Volusia Quality Homes, LLC
2. The mailing address of the limited liability company is : P.O. Box 740986
Orange City, FL 32774-0986

02/23/04 L04000014099
3. Date of filing/registration in Florida 4. Document number

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

Small Business Resources, Inc.
Name
773 S. Kirkman Rd., Ste. 118
Address
Orlando, FL 32811
City, State and Zip

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

Small Business Resources USA, Inc.
Name
773 S. Kirkman Rd., Ste. 118
Florida street address (P.O. Box NOT acceptable)
Orlando, FL 32811
City, State and Zip

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.

James K. Duerr, CPA
(Signature of a member or authorized representative of a member)

James K. Duerr, CPA
(Printed or typed name of signer)

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.

James K. Duerr, CPA
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

INHS18 (8/05)

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06 MAR -7 AM 9:26
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TALLAHASSEE FLORIDA