

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000103802

Entity Name: QUID Q SERVICE, LLC

**FILED**  
**Nov 26, 2007**  
**Secretary of State**

**Current Principal Place of Business:**

8300 N.W. 53 STREET, STE. 350  
DORAL, FL 33166

**New Principal Place of Business:**

8300 N.W. 53 STREET STE. 350  
DORAL, FL 33166

**Current Mailing Address:**

8300 N.W. 53 STREET, STE. 350  
DORAL, FL 33166

**New Mailing Address:**

8300 N.W. 53 STREET STE. 350  
DORAL, FL 33166

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PAUCAR, PAUL  
8300 N.W. 53 STREET, STE. 350  
DORAL, FL 33166 US

**Name and Address of New Registered Agent:**

PAUCAR, PAUL  
8300 N.W. 53 STREET STE. 350  
DORAL, FL 33166 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PAUL PAUCAR

11/26/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: PAUCAR, PAUL  
Address: 8300 N.W. 53 STREET, STE. 350  
City-St-Zip: DORAL, FL 33166

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: PAUCAR, PAUL  
Address: 8300 N.W. 53 STREET STE. 350  
City-St-Zip: DORAL, FL 33166

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PAUL PAUCAR

MGR

11/26/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date