

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000105871

Entity Name: Q VOLLEYBALL L.L.C.

**FILED**  
**Nov 19, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

4274 SHADOW CREEK CIRCLE  
OVIEDO, FL 32765 US

**New Principal Place of Business:**

**Current Mailing Address:**

4274 SHADOW CREEK CIRCLE  
OVIEDO, FL 32765 US

**New Mailing Address:**

FEI Number: 20-5801837

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NGUYEN, QUYNH T  
4274 SHADOW CREEK CIRCLE  
OVIEDO, FL 32765 US

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

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: QUYNH NGUYEN

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: NGUYEN, QUYNH T  
Address: 1151 JACKSON ST.  
City-St-Zip: OVIEDO, FL 32765 US

Title: MGRM  
Name: CONLEY, DARRELL  
Address: 4274 SHADOW CREEK CIRCLE  
City-St-Zip: OVIEDO, FL 32765 US

Title: MGRM  
Name: WILSON, JEFF  
Address: 4274 SHADOW CREEK CIRCLE  
City-St-Zip: OVIEDO, FL 32765 US

I hereby 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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: QUYNH NGUYEN

MGRM

11/19/2014

Electronic Signature of Authorized Person

Date