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CORPORATION SERVICE COMPANY

1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 726090 4375419

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: May 8, 2023

ORDER TIME : 1:58 PM

ORDER NO. : 726090-025

CUSTOMER NO: 4375419

CHANGE OF AGENT

NAME: QUALITY LABOR MANAGEMENT, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

ì.	Na	me of the limited liability company: QUALITY LABO					-	
2.	(a)	4035 WEST STATE ROAD 46		(b)	P.O. BOX	471207		
	ζ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(~)		lailing address of limited li (Note: MAY BE POST G	-	-
		SANFORD, FL 32771			LAKE MO	NROE, FL 32747		
		02-27-2007	<u> </u>	_	L07000022	362		
3. 5	(a)	Date of filing/registration in Florida HOCTOR, JAMES J	4.		Γ	Document number		
Э.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 215 NORTH EOLA DRIVE Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					2023 HAY	
		ORLANDO , FL	32801	 801			-8 Ai	· .
	(b)	Corporation Service Company, Inc.				AH (0: 00		
		Enter name of NEW Registered Agent and/or NEW Registered Office address:					. J	
		1201 Hays Street						
		NEW Registered Office Address:						
		TALLAHASSEE , FL	32301					
cha age wa the	ange ent v s/we arti	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of organization or the operating agreement of the word of a member or authorized representative of a member	registe ability of the li limited	ered corr imit d lia	office and pany, it is led liability	the business office of hereby confirmed that company or as otherw	the registere	ed 's)
S	ignat	ure of a member or authorized representative of a member-				Printed or typed name of si	gnee	
	Ü	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I limit writing of this change by the SM, AVI	ree to a perfori d for in hereby	ect in man Ch con	n this capac ice of my di apter 605, firm that th	city. I further agree to dies, and I am familia F.S. Or, if this docum te limited liability com	comply with r with and a sent is being pany has be	h the sccept filed en
Sig	gnatu	e of Registered Agent						