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PICK-UP WAIT MAIL						
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J. HARRIE

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	CHRIS QUARLES PROPERTIES, LLC						
50050		c of Limited	1 Liability Company				
Dear Si	ir or Madam:						
The en	closed Registered Agent/Registered Offi	ce Change a	and fee(s) are submitted for filing.				
Please	return all correspondence concerning the	s matter to t	the following:				
JAME	S CHRISLER QUARLES						
	Name of Person						
CHRI	S QUARLES PROPERTIES, LLC						
	Firm/Company						
911 R	NDGECREST RD						
	Address						
ORLA	NDO, FL 32806						
	City/State and Zip Code						
CHRI	S@CHRISQUARLES.COM						
E	-mail address: (to be used for future ann	ual report no	otification)				
For fur	ther information concerning this matter,	please call:					
CHRIS	S QUARLES	321 at (303-1469				
	Name of Person		Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:							
	2 \$25 Filing Fee		\$55 Filing Fee & Certified Copy				
INHS18	3 (2/14)						

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.

1. Na	ame of the limited liability company:	RLES P	ROPERTI	ES, LLC			
2. (a)	2511 NORTHUMBERLAND AVE,	(b	2511 NC	ORTHUMBERLAND AVE, Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)						
	ORLANDO, FL 32804		ORLAND	OO, FL 3280	04		
	06/04/2007		L0700005	59062			
3. 5. (a)	Date of filing/registration in Florida JAMES CHRISLER QUARLES	4.		Document nu	mber		
). (a)	Registered Agent and Registered Office shown on the records of 2511 NORTHUMBERLAND AVE, ORLAND		•	::			
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRESS</u>	2				
(b)	, FI				ALARASSI	2016 JUE 20	Attenta Attenta
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 911 RIDGECREST RD		Rim 37 ts				
	NEW Registered Office Address:			•	3.		
	ORLANDO , FI	32806					
the charagent was/we	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited linere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the rus Quarles	f the regis iability co of the lim e limited l	stered office impany, it is ited liability	e and the busir is hereby confi- y company or apany.	ness office	of the	registered ange(s)
Signa	ture of a member or authorized representative of a member		•	Printed or typed	I name of sig	gnee	
provisi the obl to mere	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	e perform	ance of my a	duties, ánd Í a	m Familia.	r with i	and accept
	re of Registered Agent						