

LD90000005795

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

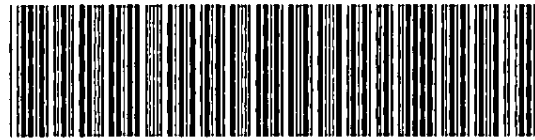
(Document Number)

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OF STATE
OFFICE

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D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: QmBas Properties
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dolores Yunker
Name of Person

N/A
Firm/Company

1073 Kenton St.
Address

Aurora, Co., 80010
City/State and Zip Code

elyunker97@qbas.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dolores Yunker at (305) 364 3056
Name of Person Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 7, 2020

DOLORES YUNKER
1073 KENTON ST
AURORA, CA 80010

SUBJECT: AMDAS PROPERTIES, LLC
Ref. Number: L09000005795

We have received your document for AMDAS PROPERTIES, LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Alien Business Organization, but your entity is a Florida Limited Liability Company. Please complete and return the enclosed blank form(s).

You will also need to complete the proper form for the other filings you submitted with this filing and check.

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) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 820A00019564

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. Name of the limited liability company: AMBAS Properties LLC

2. (a) 1073 KENTON ST

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Bunora, Co., 80010

(b) SAME as 2

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

3. 01/05/2009
Date of filing/registration in Florida

4. 609000005795
Document number

5. (a) Simone, Ashley
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1809 Colonial Blvd
Registered Office Address (Note: **MUST BE FLORIDA STREET ADDRESS**)

Fort Myers, FL 33907

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Joshua Gault
NEW Registered Office Address:

4456 Tamiami Trail # B14

Fort Charlotte, FL 33980

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.

Dolores Yunker Morgan
Signature of a member or authorized representative of a member

Dolores Yunker
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 605, 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.

X [Signature]
Signature of Registered Agent