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COVER LETTER

INHS18 (2/14)

то:	Registration Section Division of Corporations					
SUBJ	JQR Research Group, LLC					_
		ne of Limite	d Liability Company			
Dear	Sir or Madam:					
The e	nclosed Registered Agent/Registered Off	ice Change	and fee(s) are submitted for fi	ling.		
Please	e return all correspondence concerning th	is matter to	the following:			
Jaco	queline Rodriguez					
	Name of Person					.
JQR	Research Group, LLC					
	Firm/Company				•	
1396	61 SW 112th Street			SEOR ALLA	2019 FEB	
	Address			ELYN SYLLIN	EB 28	71 2
Miar	mi, FL 33186				3 ₽	E S
	City/State and Zip Code			STATI LORIO	ယ္ လ	Ë
jack	ieqr@bellsouth.net			42,174		
	E-mail address: (to be used for future and	nual report r	notification)			
For f	urther information concerning this matter	, please call	:			
Jaco	queline Rodriguez	305 at (606-5133			
	Name of Person	4. \	Area Code & Daytime	Telephone	Num	ber
	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	g amount:				
	☑ \$25 Filing Fee	C	\$55 Filing Fee & Certified	Сору		

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

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability compansubmits the following statement in order to change its registered office or registered agent, or both, in the State controller.

Na	me of the limited liability company: JQR Rese	arch Group, LLC	
(a)	13961 SW 112th Street	(b) 13961	SW 112th Street
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	Miami, FL 33186	Miami,	FL 33186
	05/02/2011	 L11000	0051527
	Date of filing/registration in Florida	4.	Document number
(a)	Jacqueline Rodriguez		
(4)	Registered Agent and Registered Office shown on the record	ls of the Florida Dept. of St	ate:
	Registered Office Address (MUST BE FLORIDA STRE	<u>SET ADDRESS)</u>	2019
	Miami	, FL_33183	-APPR AN FIL. 2019 FEB 28 SECRETARY I'd LAHASSEI
(b)			PROVE AND ILED ILED WOFS
` '	Enter name of NEW Registered Agent and/or NEW Regist	ered Office address:	ခွန်း မှ မြ
			一部 マ
	Raymar Rodriguez		
	Raymar Rodriguez NEW Registered Office Address:		

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.

Signature of a member or authorized representative of a member

Jacqueline Rodriguez

Printed or typed name of signee

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.

Signarde of Registered Agent

Division of Corporations P.O. Roy 6327 Tallahassee, FL 32314