

L14000000660

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(Address)

(City/State/Zip/Phone #)

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Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2016

ROBERT QUINN
2210 ILLINOIS ST
ORLANDO, FL 32803 US

SUBJECT: QUINNSULTING, LLC
Ref. Number: L14000000660

We have received your document for QUINNSULTING, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 116A00020261

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: QUINNSULTING
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:

ROBERT QUINN
Name of Person

QUINNSULTING
Firm/Company

2210 ILLINOIS ST
Address

ORLANDO, FL 32803
City/State and Zip Code

ROB@QUINNSULTING.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROB QUINN at (407) 770-7637
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:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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: QUINN CONSULTING

2. (a) _____ (b) _____

Principal office address of limited liability company:

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

2210 ILLINOIS ST
ORLANDO, FL 32803

Mailing address of limited liability company:

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

2210 ILLINOIS ST
ORLANDO, FL 32803

3. _____ Date of filing/registration in Florida 4. _____ Document number

5. (a) INC FOR FREE (INCORP)
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

3773 HOWARD HUGHES PKWY # 500S, LAS VEGAS, NV 89169

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

2210 ILLINOIS ST
ORLANDO, FL 32803

(b) Robert Quinn

Enter name of NEW Registered Agent and/or NEW Registered Office address:

2210 ILLINOIS ST ORLANDO, FL 32803

NEW Registered Office Address:

2210 ILLINOIS ST
ORLANDO, FL 32803

FILED
16 OCT 17 PM 1:50
TALLAHASSEE, FLORIDA

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]
Signature of a member or authorized representative of a member

ROBERT QUINN
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.

[Signature]
Signature of Registered Agent