

L4000036541

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FEB 05 2019
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 17, 2019

DAVINA STAUFFER
Q FIT, LLC
3685 SW 30TH AVENUE
FORT LAUDERDALE, FL 33312

SUBJECT: Q FIT, LLC
Ref. Number: L14000036541

We have received your document for Q FIT, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 019A00001400

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TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Q Fit LLC
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:

Maurice J. Baumgarten, Esq.
Name of Person

Maurice J. Baumgarten, Esq.

4551 Ponce de Leon Boulevard

P.O. Box NOT acceptable

Coral Gables, Florida 33146

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person at (_____) _____
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: Q Fit LLC

2. (a) 3685 SW 30th Avenue (b) 3685 SW 30th Avenue

Principal office address of limited liability company:

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

Mailing address of limited liability company:

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

3. 03-4-2014 4. L 14000036451

Date of filing/registration in Florida

Document number

5. (a) James L. Pruden, Esq.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

220 S. Dixie Highway Boca Raton, FL 33432

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Boca Raton, FL 33432

(b) Maurice J. Baumgarten Esq.

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

4551 Ponce de Leon Boulevard

NEW Registered Office Address:

Coconut Gables, FL 33146

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] John V. Allen

Signature of a member or authorized representative of a member

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.

[Signature]

Signature of Registered Agent

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

FILING FEE: \$25.00