L14000131252

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J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations				
RESSQ: Real Estate Support	Services Quick, LLC			
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
Kathleen Teach				
Name of Person				
RESSQ: Real Estate Support Services G	Quick, LLC			
Firm/Company				
12675 Fox Ridge Drive				
Address	· · ·			
Bonita Springs FL 34135				
City/State and Zip Code				
kathleen@zenlamps.com				
E-mail address: (to be used for future annu-	al report notification)			
For further information concerning this matter, p	elease call:			
Kathleen Teach	239 7772904			
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 a	mount:			
■ \$25 Filing Fee ck #816	□ \$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. Na	ame of the limited liability company: RESSQ: Real	Estate Su	upport Services, Quick, LLC
2. (a)		(b)	
, ,	Principal office address of limited liability company:	_	Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) 705 Crossfield Circle		(Note: MAY BE POST OFFICE BOX)
		_	
	Naples, FL 34104		
	08/21/14	L 1	4000131252
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	RESSQ: Real Estate Support Services Quicl	k, LLC	
J. (a)	Registered Agent and Registered Office shown on the records of t	he Florida Dep	ot. of State:
	Marianne Dwyer		
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	
	705 Crossfield Circle		
	Naples	34104	
	, FL		
(b)			Ø. ≥ N II
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office addres	s: inc. 🗻 M
	Kathleen Teach		—————————————————————————————————————
	NEW Registered Office Address:		3>111 01
	12675 Fox Ridge Drive	<u>.</u>	
	Bonita Springs , FL	34135	
the cha agent was/w the art	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the register ability comp of the limited limited liab	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in ility company.
	athleen Jeach ature of a member or authorized representative of a member	Kathie	en Teach
Ū	•		Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I i din, writing of this change.	ee 10 act in performanc d for in Cha hereby confi	inis capacity. I juriner agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been

Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314 FILING FEE: \$25.00

Kathleen Jench

Signature of Registered Agent