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TALLANYSSEE FLOAM

DEC 15 2015 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Ouality Mouna Services 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:
Richard Brown
Name of Person
Quality Moving Services 11c
Firm/Company
9716 SE 171st Pace Address
Address .
Summerfield FL. 3449] City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
12 chard Brown at (352, 430-7393
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301
Enclosed is a check for the following amount:
□ \$25 Filing Fee & Certified Copy

INHS18 (2/14)

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.

		• • -	11.		
1. Name of the limited liability company: Ovality	hound	Services		1	
2. (a) 2461 unit D Hwy 441/27	_ (b).	9716	SE 171	54 F	Tace
Principal office address of limited liability company:	_ ().	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
(Note: MUST BE STREET ADDRESS)		-	O \	_	
Fruthal Park Fl. 34731		Somme	1 +1c1 q	Fl.	3491
		•			
3. Date of filing/registration in Florida		14000	13242	9	
3. Date of filing/registration in Florida	4.	Doca	ument numi	per	
5. (a) Travis W. long					
Registered Agent and Registered Office shown on the records of the	he Florida D	ept. of State:			
Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)				
120 Spring Arbor lane				=1.	<u>7.3</u>
lady lake . FI.	3219	59			
, FL.				To the second	
(b) Richard A. Broun				50 Am (2) (3)	₹
Enter name of NEW Registered Agent and/or NEW Registered	Office addr	ess:		17] 17]	P P
(⊕) €5238€					ű ű
					រូវ ហ
NEW Registered Office Address:				<i>;></i>	
9716 SE 171 ST Y.					
Summerfield FL	3449	3 11			
OUMVITET , FL	244	11			
If the limited liability company is not organized under the law	vs of the S	tate of Florida	, it is hereby	y confirm	ned that after
the change or changes are made, the Florida street address of agent will be identical. Or, in the case of a Florida limited lia	the registerbility con	ered office and opany, it is here	tne busines eby confirm	ss office red that t	of the registered the change(s)
was/were authorized by an affirmative vote of the members of the articles of organization of the operating agreement of the				otherwi	se provided in
the artistes of organization of the operating agreement of the		ichard	Books		
Signature of a member or authorized representative of a member		Prin	ted or typed na	ame of sig	nee
I hereby accept the appointment as registered agent and agr	ee to act i	n this capacity	. I further d	igree to	comply with the
provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provide	perjormai d for in Cl	nce of my dutie hapter 605, F.S	s, and I am Or, if this	jamiliar docume	ent is being filed
provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provided to merely reflect a change in the registered office address, I knotified in writing of this change.	nereby coi	ijirm that the li	imited itabi	uty comp	any nas been