15000/84909

(Requestor's Name)					
(Address)					
(Address)					
(,					
(0) 10 1 7 10					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
(Boodine, Namber)					
Conference in the contract of					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
ļ					



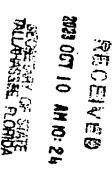


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LLC RAERO Change



A. RAMSEY OCT 11: 2023



Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 10/10/2023	_		**WALK IN**
ENTITY NAME QUEE	N R.E., LLC		
DOCUMENT NUMBER	· · · · · · · · · · · · · · · · · · ·		
	PLEASE FILE TH	E ATTACHED AND RETURN	
XXXXXXXX	Plain Copy		
	Certified Copy		
	Certificate of Status		
*	*PLEASE OBTAIN THE FO	DLLOWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts	& Amendments	
	Certificate of Good Sta	nding	
	APOSTILLE' / N	IOTARIAL CERTIFICATION	
COUNTRY OF DESTINA			
NUMBER OF CERTIFICA	ATES REQUESTED		
TOTAL OWED \$25		ACCOUNT #: 1201600000)72
		S 8 FM	
Please call Tina at	the above number for	any issues or concerns. Thank you	so much!

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. N	lame of the limited liability company: QUEEN R.E., LI	LC	_		
2. (a)	1601 MCCLOSKEY ROLL EVARD	((b) 1601 MCCLOSKEY BOULEVARD		
z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	TAMPA, FL 33605	_	TAMPA.	FL 33605	
	11/02/2015		L15000184	1909	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a	CF REGISTERED AGENT, INC.				
·	Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 100 S. Ashley Drive			MEN OCT TO AMIL: 28	
	Tampa FI	33602	_		
(b)	b) Barkett, Richard A				
, ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	: 28			
	1601 MCCLOSKEY BOULEVARD				
	NEW Registered Office Address:			_	
	TAMPA, FI	L_33605		-	
chang agent was/w	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	register ability c of the lir	ed office a ompany, it nited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
/S/R	ichard A Barkett	Ric	hard A Bark	tett	
_	ature of a member or authorized representative of a member		-	Printed or typed name of signce	
provis the ob to me	eby accept the appointment as registered agent and agy sions of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address, I ded in writing of this change.	ree to ac perform d for in hereby c	t in this cap nance of my Chapter 60 confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	
	ichard A Barkett				
Signat	ure of Registered Agent				