117000031814

. (Requestor's Name)						
(Address)						
(Address)						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	WAIT	MAIL				
(Bu	usiness Entity Nan	me)				
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



500296251135

03/17/17--01009--004 **25.00

MAR 20 2017 S. YOUNG



COVER LETTER

TO: Registration Section Division of Corporations						
Z-Quick, LLC SUBJECT:						
	of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this	matter to the following:					
Josh Yelen						
Name of Person						
Z-Quick, LLC						
Firm/Company						
3263 Allamanda St						
Address						
Miami, FI 33133						
City/State and Zip Code						
joshuayelen@gmail.com						
E-mail address: (to be used for future annua	l report notification)					
For further information concerning this matter, pl	lease call:					
Josh Yelen	305 322-4561					
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					
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.

1.	Na	ume of the limited liability company: Z-Quick, LLC			
2. (a)	3263 Allamanda Street	(b) 3263 Allamanda St		
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (*	/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Miami, Fl		Miami,	FI
		33133	- -	33133	
		February 9, 2017		L170000	31814
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	Mitchell A Yelen			
	()	Registered Agent and Registered Office shown on the records of the 3225 Aviation Avenue	e Florida	Dept. of Sta	ite:
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS	2	_
		Suite 500			T. P.S.
		Miami gradi	33133		WARETO
				·	
(b)	David Watkins			
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office add	<u>iress</u> :	
		3263 Allamanda St			9
		NEW Registered Office Address:			_ _
					_
		Miami , FL 3	3133		_
the cager was the s	cha nt w we grtic	mited liability company is not organized under the laws ange or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liable the authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liable that the appointment as registered agent and agree ones of all statutes relative to the proper and complete programment of the proper and complete programment as provided by reflect a change in the registered office address, I have a proper and the proper and the proper and complete programment as provided and the proper and the pro	he regis bility co the lim imited l Mito	itered office impany, it ited liabilitiability con chell A Ye	the and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany. Printed or typed name of signee
Sign	atur	re of Registered Agent			