

L17000083312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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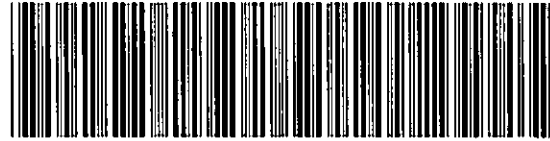
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

D SCOTT

JUL 20 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: QL Realty, 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:

Brenda Lombardi (formerly Punteco)

Name of Person

QL Realty LLC

Firm/Company

8501 Astronaut Blvd #15-204

Address

Cape Canaveral FL 32920

City/State and Zip Code

realtywithbrenda@gmail.com

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

For further information concerning this matter, please call:

Brenda Lombardi

Name of Person

at (321) 604-2995

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

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SECRETARY OF STATE

**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: QL Realty LLC
2. (a) 8501 Astronaut Blvd #5-204 (b) 8501 Astronaut Blvd #5-204
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)
Cape Canaveral FL 32920 Cape Canaveral FL 32920
3. 04/10/2017 4. L17000083312
Date of filing/registration in Florida Document number
5. (a) Theresa M ZORN Tax Accounting
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
40 Nevins Court
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
Memt Island, FL 32953
- (b) Brenda Lombardi
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
8501 Astronaut Blvd #5-204
NEW Registered Office Address:
Cape Canaveral, FL 32920

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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.

B. Lombardi
Signature of a member or authorized representative of a member

Brenda Lombardi
Printed or typed name of signer

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.

B. Lombardi
Signature of Registered Agent