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(Re	questor's Name)				
(Ad	dress)				
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(Cit	y/State/Zip/Phone	: #)			
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SECRETARY OF STATE

AND ANASSEE FLORING

JAN 1 1 2019 S. YOUNG

COVER LETTER

Divis	sion of Corporations				
SUBJECT:	Quality First Moving LLC				
SOBJECT.	Nan	ne of Limited Li	ability Company	· · · · · · · · · · · · · · · · · · ·	
Dear Sir or M	fadam:				
The enclosed	Registered Agent/Registered Off	Tee Change and	fec(s) are submitted for filing	g.	
Please return	all correspondence concerning th	is matter to the	following:		
Adrienne V	Villiams				
	Name of Person				
Quality Firs	st Moving LLC			≂ ′∞ =	
	Firm/Company			ALLAS ALLAS	1
322 Lagoo	n Key			25.55 7.75 7.75 7.75 7.75 7.75 7.75 7.75	3
	Address				₹ (D)
Plant City,	FL 33565			E FLORIDA	n n
	City/State and Zip Code		- -	3≻° ° ~	4
info@quali	tyfirstmovingllc.com				
E-mail	address: (to be used for future am	ual report notif	ication)		
For further in	formation concerning this matter	, please call:			
Adrienne V	Villiams	813 at (850-1755)		
	Name of Person		Area Code & Daytime Tele	ephone Number	
Regis Divis Clifte 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle hassee, Florida 32301	Re Di P.C	gistration Section vision of Corporations D. Box 6327 Hahassee, Florida 32314		
Encl	osed is a check for the following	g amount:			
☑ \$2	5 Filing Fee	□ Sá	55 Filing Fee & Certified Cop)y	

Registration Section

TO:

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

a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	F (2) (204.7		00000000
	5/3/2017		000098296
	Date of filing/registration in Florida	4.	Document number
a)	Quality First Moving, LLC		
	Registered Agent and Registered Office shown on the records	of the Florida Dept.	of State:
	Designation of the Address of MIST BE ELOBINA CTREE	T (DDDECC)	7.18
	Registered Office Address (MUST BE FLORIDA STREE) 322 Lagoon Key	<u>:1 ADŪĶESS)</u>	
			——————————————————————————————————————
	Plant City	FL	28 R
	Quality First Moving LLC		1,08 x 2:
)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office address:	_
	Adrienne Williams		
	NEW Registered Office Address:		
	100 S Ashley Dr Ste 600		
	Татра	_{FL} 33602	
ha t v we gu	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of the member of a member of a member of a member of a member.	of the registered Hiability compans of the limited l he limited liabili	I office and the business office of the registe ny, it is hereby confirmed that the change(s) liability company or as otherwise provided i
пa	ture of a member or authorized representative of a member		Printed or typed name of signee

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

INTERE AND

Signature of Registered Agent