

L17000144384

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

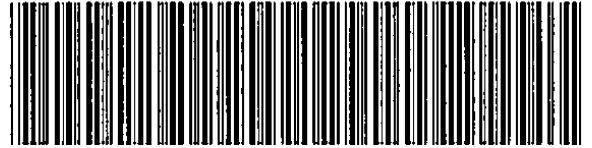
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 18 PM 4:47

FILED

07/19/19

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Judith Quinn, LLC.
Name of Limited Liability Company

SECRETARY OF STATE
JUL 18 PM 4:47
TALLAHASSEE, FLORIDA

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:

Judith Quinn
Name of Person

Judith Quinn, LLC.
Firm/Company

1881 Castle Woods Dr.
Address

Clearwater, FL
City/State and Zip Code

judyquinn45@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Judith Quinn at (813) 523-7331
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

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 Florida.

1. Name of the limited liability company: Judith Quinn, LLC.

2. (a) 1881 Castle Woods Dr. (b) 1881 Castle Woods Dr.

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

Clearwater, FL 33759

Clearwater, FL 33759

7-5-2017

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3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Judith Quinn

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

3114 Winglewood Cr.

LUTZ, FL 33558

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Judith Quinn

NEW Registered Office Address:

1881 Castle Woods Dr.

Clearwater, FL 33759

JUL 18 PM 4:47
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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.

Judith Quinn
Signature of a member or authorized representative of a member

Judith Quinn, MGR
Printed or typed name of signee

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.

Judith Quinn
Signature of Registered Agent