h17(CC221567

(Requestor's Name)							
(Address)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
(,							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
J. HORNE							
DEC 2.9 2021							
⊕ <u>-</u> C 4 3 2021							

Office Use Only



300377930123

12/13/21--01022--001 **25.00



COVER LETTER

	sistration Section ision of Corporations						
SUBJECT:	Q-1 Technologies, LLC						
	Name of Limited Liability Company						
Dear Sir or	Madam:						
The enclose	d Registered Agent/Registered	Office Change ar	nd fee(s) are submitted for filing.				
Please return	n all correspondence concerning	g this matter to th	e following:				
Amy Barb							
	Name of Person	· · · · ·					
America II C	Group, LLC						
	Firm/Company						
2500 118th A	Ave N						
	Address	-					
St. Petersbur	rg. FL 33716						
	City/State and Zip Cod	e					
corp-tax@a2	globalelectronics.com						
E-mail	address: (to be used for future	annual report no	ification)				
For further i	information concerning this mat	ter, please call:					
Amy Barb		727 at (571-2032				
	Name of Person	(Area Code & Daytime Telephone Number				
Reg Div P.O	iling Address: gistration Section vision of Corporations O. Box 6327 lahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enc	closed is a check for the follow	ing amount:					
= \$	25 Filing Fee	0	\$55 Filing Fee & Certified Copy				
INHS18 (2/1-	4)						

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	ame of the limited liability company: Q-1 Technology	ogies, LLC							
7 (2)		((h)						
2. (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)					
	2500 118th Ave N			2500 118th Ave N					
	St. Petersburg, FL 33716			St. Petersburg, FL 33716					
	10/25/2017		I	.170002215	67				
3.	Date of filing/registration in Florida	4.	_		Document numbe	r			
5. (a)	Michael Pointer								
J. (a)	Registered Agent and Registered Office shown on the record	ds of the Florid	da l	Dept. of State	:				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					SEI FALI	2021		
	2510 118th Ave N					CRE	문	77	
	St. Petersburg	. FL_33716				TARN	2021 DEC 13	-	
(b)	Amy Barb					OF SIA	AH	П	
(,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>	tered Office 8	dd	ress:		- 5	AM 11: 15	O	
							O1		
	NEW Registered Office Address:								
	2500 118th Ave N								
	St. Petersburg	. FL_33716							
change agent v was/w	imited liability company is not organized under the corchanges are made, the Florida street address of will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membericles of organization or the operating agreement of	The register of liability c ers of the lin the limited	rec on mit lia	l office and apany, it is ted liability	the business office hereby confirmed company or as of	ce of the I that the	registe chang	red e(s)	
Signature of a member or authorized representative of a member					Printed or typed name	e of signee			
provisi the obi to mer	by accept the appointment as registered agent and ions of all statutes relative to the proper and compiligations of my position as registered agent as provely reflect a change in the registered office address d in writing of this change.	leie nerforn	u	ice of my d	uties, ånd I am far	miliar wi	h and	accent	
Signatu	ire of Registered Agent	•							

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