

**L18000141560**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

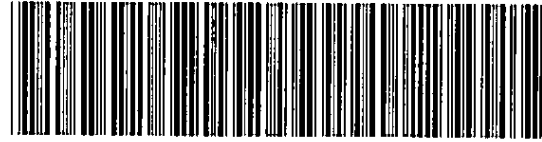
(Document Number)

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**NOV 15 2021**

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**FILED**  
**2021 NOV -1 PM 11:00**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FL**

**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: UHQ LLC

2. (a) 525 WEST PLANT ST (b) 525 WEST PLANT ST

Principal office address of limited liability company:

**(Note: MUST BE STREET ADDRESS)**

WINTER GARDEN, FL 34787

Mailing address of limited liability company:

**(Note: MAY BE POST OFFICE BOX)**

WINTER GARDEN, FL 34787

06/07/2018

L18000141560

3. Date of filing/registration in Florida

4. Document number

5. (a) JOSEPH HOFFER

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

525 WEST PLANT ST

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

WINTER GARDEN, FL 34787

(b) JOSEPH HOFFER

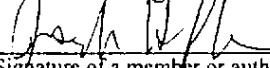
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

#285, 18981 US HWY 441

**NEW Registered Office Address:**

MOUNT DORA, FL 32757


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.

  
Signature of a member or authorized representative of a member

JOSEPH HOFFER

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.*

  
Signature of Registered Agent

**FILED**  
**2021 NOV - 1 PM 1:00**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FL**