# 11900178057

(Requestor's Name)				
(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:				

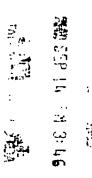
Office Use Only

135-523-524-



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C. GOLDEN SEP 21 2020

# CORPORATE ACCESS, \_\_\_\_\_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

#### **WALK IN**

	CERTIFIED COPY	
:	РНОТОСОРУ	
!	CUS	
	FILING	AMENDMENT
Q	UALITY DETAIL CLEANIN	NG LLC
(C	CORPORATE NAME AND DOCUM	MENT #)
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ΑL	TIONS:	

#### **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: Quality Deta	al Cleaning LLC nited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:					
Roger Terras Name of Person					
Firm/Company					
10050 Highway 40 &	2. # 14				
Inglis Florida 34 City/State and Zip Code	449				
roger Terras 1 @ GMail. C d-mail address: (to be used for auture annual repo	C m rt notification)				
For further information concerning this matter, please c	all:				
Roger Jerras at (	786 ) 738 - 7010 Area Code & Daytime Telephone Number				
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Enclosed is a check for the following amount:					
□ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy				
INHS18 (2/14)					



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 15, 2020

CORPORATE ACCESS, INC.

SUBJECT: QUALITY DETAIL CLEANING LLC

Ref. Number: L19000178057

Corrected

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The entity's date of incorporation/organization must be listed in the document.

The document must contain the complete street address of the principal office and the mailing address of the entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 820A00017556

2020 SEP 18 PM 4: 07

## 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 lia	hility company: Quality	Dotail Cleani	ng LLC
2. (a) 10050 H Principal office	Aghana y 40 & TE/Y address of limited liability company: UST BE STREET ADDRESS		ay 40 5 #-14/
Inglis,	Florida 34449	Inglis Florid	la 34449
July 10 3. Date of file	16 2019 ng/registration in Florida 4	L 190001780	7
5. (a) DONNA Registered Agent and R	Blake. egistered Office shown on the records of the Fi	- Breamen Hambe.	•
1637 7	.W. 20 Street		5.3
Registered Office Addi	tead	RESSY	- 1
	FL <u>.3</u>	<u> 3030</u>	<del></del>
	T		<u></u>
Enter name of NEW Re	gistered Agent and/or NEW Registered Office	ce address;	ယ္
10058 H NEW Registered Offic	ighway 40 C #	14	19
Inglis	,FL <u>3</u>	,	
change or changes are made agent will be identical. Or, was/were authorized by an	any is not organized under the laws of the Florida street address of the region the case of a Florida limited liability affirmative vote of the members of the or the operating agreement of the limit	stered office and the business office of company, it is hereby confirmed a limited liability company or as o ted liability company.	ce of the registered d that the change(s) therwise provided in
R. Terror	rized representative of a member	Printed or typed name	S
I hereby accept the appoint provisions of all statutes rel	ment as registered agent and agree to ative to the proper and complete perfo on as registered agent as provided for a the registered office address, I herel	o act in this capacity. I further ag formance of my duties, and I am Ia	ree to comply with the miliar with and accept
Signatule of Registered Agent			