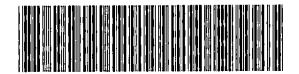
L21000360613

(R	equestor's Name)	
(Δ)	ddress)	
(^(uuiess)	
(A	ddress)	 -
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B)	usiness Entity Nam	ne)
•	•	,
(D	ocument Number)	
Certified Copies	Certificates	of Status
Special instructions to	Filing Officer:	- " -

Office Use Only



300454991493

FILED

RECEIVED 2025 OCT -6 PM 4: 23 CSC - Tallahassee
CSC 1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext: x62969 Date: 10/06/25 Order #: 4496205-42

Re: QBG FORT MYERS STATION LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25.00 - FL State Account Number: I20000000195

is Lord par

Please take the following action:

File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Amanda Miller c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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.

I. Na	nme of the limited liability company: QBG FORT M	IYERS ST	ATION LLC	
2. (a)	2001 W. MAIN ST STE #250	(2001 W.	. MAIN ST STE #250
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	- /	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	STAMFORD, CT 06902		STAMFO	DRD, CT 06902
	08/11/2021		L2100036	60613
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Spenserv, Inc.			
J. (a)	Registered Agent and Registered Office shown on the records of	of the Florid	a Dept, of Sta	nte:
	Registered Office Address (MUST BE FLORIDA STREE) 201 North Franklin Street, Ste 2150	T ADDRES	<u>S)</u>	_
	Tampa	33602		2005 OCT
		FL_		- 🙀 8 TI
/L\				1-6 T
(b)	Enter name of NEW Registered Agent and/or NEW Register	ed Office a	idress:	
	Corporation Service Company			17 37 C
	NEW Registered Office Address:			- 25 3
	1201 Hays Street			· —
	Tallahassee	32301		
	imited liability company is not organized under the left or changes are made, the Florida street address of the			
was/w	will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the lin	nited liabili	ty company or as otherwise provided in
	/ Anthony Vinci	An	hony Vinci,	, Authorized Signer
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obi to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and completing at the proper and completing at the proper and completing at the registered agent as providely reflect a change in the registered office address, of in writing of this change.	gree to ac le perform led for in I hereby c	t in this cap ance of my Chapter 60, onfirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
/S/	Grace E. Kirby			