L21000488876

(Requestor's Name)							
(Address)							
(Address)	 						
(City/State/Zip/Phone #)							
PICK-UP WAIT	MAIL						
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of St	atus						
Special Instructions to Filing Officer:							
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AUG - 9 2023							

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SELING TARY OF STATE

COVER LETTER

TO:		stration Section sion of Corporations								
SUBJI	ECT:	United QFC LLC								
		Name of Limited Liability Company								
Dear S	ir or N	Aadam:								
The en	closed	Registered Agent/Registered Offic	e Char	nge and	fee(s) are submitted for filing.					
Please	return	all correspondence concerning this	matte	r to the f	ollowing:					
		Heather Cavanaugh								
		Name of Person		-						
		Fornaro Law								
	•	Firm/Company			_					
		1022 S. LaGrange Rd.								
		Address			_					
		LaGrange, IL 60525								
		City/State and Zip Code			_					
		corporate@fornarolaw.com								
E	-mail	address: (to be used for future annu	al repe	rt notific	cation)					
For fur	ther in	iformation concerning this matter, p	olease c	call:						
		Heather Cavanaugh	at (708	639-4320					
		Name of Person	(_		Area Code & Daytime Telephone Number					
	Regi Divi P.O.	stration Section sion of Corporations Box 6327 ahassee, FL 32314			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
	Encl	osed is a check for the following :	ımoun	t:						
	■ \$2	25 Filing Fee		□ \$5	5 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 of Florida.

1. N	ame of the limited liability company:United QFC LI	LC				
2 (a)		(b)			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)i	Mailing address of lim (Note: MAY BE PC		
	25 E Central Blvd., Apt 714		25 E Centr	ral Blvd., Apt 714		
	Orlando, FL 32801		Orlando, F	TL 32801	- <u>-</u>	
			ا م ا	NON 1999	an;	
3.	Date of filing/registration in Florida	 4.	L21	Document numbe		
					•	
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida	Dent of State	- e:		
	Boris Jager	THE FRANCE	Dept. Of State	•-		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS		_		
	425 E Central Blvd, Apt 714		-			
	Orlando . Fl	32801		-	2023 JUN 16	3.45
				_	¥ E	
(b)				_	9	FIL.
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d <u>Office ado</u>	<u>Iress</u> :		P	္သံဝူခြီ
	Corporation Service Company				PH 4: 00	STAT
	NEW Registered Office Address:			_	00	<u> </u>
	1201 Hays Street			_	-	
	Tallahassee Fl	32301				
change agent v was/we	imited liability company is not organized under the la c or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	ws of the eregistere ability corof the limited li	d office and inpany, it is ited liability	d the business offices thereby confirmed y company or as of	ce of the I that the	registered change(s)
Signa	ture of a member or authorized representative of a member			Printed or typed nam	ne of signee	
provisi the obl to mero notified	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ly reflect a change in the registered office address. I d in writing of this change.	ree to act performa d for in C hereby co	in this cape nce of my c hapter 605 nfirm that t	ncity. I further agr luties, and I am fat , F.S. Or, if this de the limited liability	ree to cor miliar wi ocument : compan	nply with the th and accept is being filed y has been
	Kristyn N. Simpson ure of Registered Agent					
Signatu	ire of Registered Agent '					