-- LZZ000240845

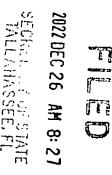
(Re	equestor's Name)	
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PICK-UP	MAIT WAIT	MAIL
(Bu	isiness Entity Nar	me)
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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J 1/3/2023

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	ECT: QMOVE LLC			
	Name of	Lin	nited Li	ability Company
Dear S	ir or Madam:			
The en	closed Registered Agent/Registered Office C	Chan	ge and	fee(s) are submitted for filing.
Please	return all correspondence concerning this ma	atter	to the f	following:
YURII	BILOUS			
	Name of Person		•	_
QMOV	E LLC			
•	Firm/Company	•		
413 SV	W 6 th Ave			
	Address			_
Halland	dale Beach , Florida 33009			
	City/State and Zip Code			_
Yurius	3005@gmail.com			
E	-mail address: (to be used for future annual r	cpo	rt notifi	cation)
For fur	ther information concerning this matter, plea	se c	all:	
YURII	BILOUS	t (786	414-8489
	Name of Person	•		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 amo	unt	: :	
	■ \$25 Filing Fee	S55 Filing Fee & Certified Copy		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.

(a)	413 SW 6 th Ave	(b) _	413 SW 6th Ave, Hallandale Beach,Fl 33009
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	05/24/2022	L2	22000240845
(a)	Date of filing/registration in Florida YURII BILOUS	4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of 1351 NE MIAMI GARDENS DRIVE	the Florida D	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET) Apt 301 E	ADDRESS)	2022 DEC SEGNELLA TALLA
	North Miami Beach	33179	A: C
(b)	YURII BILOUS (not changed)	C 26 AH 8	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 413 SW 6th Ave	Office addre	E. F. C. 27
	NEW Registered Office Address:		
	Hallandale Beach		
	Fi	33009	
ange gent v as/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited like ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	ws of the St registered ability comp of the limite limited liab	office and the business office of the registered apany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided it
	ture of a member or authorized representative of a member		Printed or typed name of signee
ovisi	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I l	performano	ice of my duties, and I am familiar with and acc