## Florida Department of State Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000178252 3)))



H230001782523ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

٠١٠ دن

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future ുannual report mailings. Enter only one email address please.\*\*

Email Address:\_

## LLC REGISTERED AGENT CHANGE QUICK INSURANCE LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 1 5 2023

K. Brumbiey

## 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: Quick Ir	nsurance	: LLC
2. (a)		(b)	
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	V-7	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	05/11/2023		L23000232848
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	QUICK, TREVOR D		
J. (a)	Registered Agent and Registered Office shown on the records	of the Florida Dep	t. of State:
	452 MERLIN WAY		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
	TALLAHASSEE	FL 32301	
	Registered Agents Inc		20
(h)	Enter name of NEW Registered Agent and/or NEW Register	red Office address	
	7901 4th St N		2023 HAY 12
	NEW Registered Office Address:		P 7 7
	STE 300		
	St. Petersburg	<sub>FL</sub> 33702	<u> </u>
the ch agent was/w	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the companion of the operating agreement of the companion of the operating agreement of the companion of the operating agreement of t	of the registere liability compa s of the limited	d office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in
	Policy pary		Robin Jones
Signa	sture of a member or authorized representative of a member		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 natified in writing of this change.

David Roberts - Assistant Secretary

Signature of Registered Agent