## La4000491a64

| (1                                      | Requestor's Name)       |             |  |  |  |
|---|-------------------------|-------------|--|--|--|
| (/                                      | Address)                | <del></del> |  |  |  |
|   | Address)                |             |  |  |  |
| ((                                      | City/State/Zip/Phone #) |             |  |  |  |
| PICK-UP                                 | WAIT                    | MAIL        |  |  |  |
|   | Business Entity Name)   |             |  |  |  |
| (Document Number)                       |                         |             |  |  |  |
| Certified Copies                        | Certificates of S       | Status      |  |  |  |
| Special Instructions to Filing Officer: |                         |             |  |  |  |
|   |                         |             |  |  |  |
|   |                         |             |  |  |  |
|   |                         |             |  |  |  |
|   |                         |             |  |  |  |

Office Use Only



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## . COVÉR LETTER

| TO: Registration Section  Division of Corporations             | <b>∜</b> `   |
|--|--|
| Q3 PENSACOLA, LLC  |  |
| SUBJECT: Name of Limited                                       | Liability Company                                      |
| Dear Sir or Madam:   |  |
| The enclosed Registered Agent/Registered Office Change at      | nd fee(s) are submitted for filing.                    |
| Please return all correspondence concerning this matter to the |  |
| Haley E. Hadden  |  |
| Name of Person   | <del></del>  |
| Litvak Beasley Wilson & Ball LLP                               |  |
| Firm/Company   | <del></del>  |
| 40 Palafox Place Suite 300                                     |  |
| Address  |  |
| Pensacola, FL 32502  |  |
| City/State and Zip Code  | <del></del>  |
| haley@lawpensacola.com   |  |
| E-mail address: (to be used for future annual report no        | ification)   |
| For further information concerning this matter, please call:   |  |
| Haley E. Hadden 850 at (                                       | 432-9818<br>)  |
| Name of Person   | Area Code & Daytime Telephone Number                   |
| Mailing Address:   | Street Address:  |
| Registration Section Division of Corporations                  | Registration Section Division of Corporations          |
| P.O. Box 6327  | The Centre of Tallahassee                              |
| Tallahassee, FL 32314  | 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)

## 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                                     | me of the limited liability company: Q3 PENSACOL   | A, LLC  | <u></u> .  |  |  |                               | <del></del>          |
|---|--|---|--|--|--|-------------------------------|----------------------|
|   |  |   |  |  |  |                               |                      |
| ω. <b>(</b> Δ,                            | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  | ·   | - ,  | Mailing address of lit<br>(Note: MAY BE I  |  |                               |                      |
|   | 1312 E. CERVANTES STREET   |   | 1312 E. C  | ERVANTES STRE  | EET  |                               |                      |
|   | PENSACOLA, FL 32501  |   | PENSAC   | OLA, FL 32501  |  |                               |                      |
|   | November 21, 2024  |   | L2400049   | 1264   |  |                               |                      |
| 3.  | Date of tiling/registration in Florida   | 4.  |  | Document numb  | er   |                               |                      |
| 5 (6)                                     |  |   |  |  |  |                               |                      |
| 5. (a)                                    | Registered Agent and Registered Office shown on the records of Herrick, Sharon H   | the Florid                                    | la Dept. of Sta  | te:  |  | 2                             |                      |
|   | Registered Office Address (MUST BE FLORIDA STREET  | ADDRES  | <u>'S)</u>   | _  | نا <u>ئ</u> ے۔                               | 025                           |                      |
|   | 1312 E. CERVANTES  |   |  |  |  | 2025 MAY                      | 1                    |
|   | Pensacola FI   |   |  |  |  | -2                            |                      |
|   |  | -   |  |  | 48.  | <del>73</del>                 |                      |
| (b)                                       | Enter name of NEW Registered Agent and/or NEW Registered   | l Office a                                    | ddress:  | _  | .:: <u>T</u> ;                               | AM 10: 56                     |                      |
|   | Haley E. Hadden  |   |  |  | •  | Ο.                            |                      |
|   | NEW Registered Office Address:   |   | · · · · · · ·  | _  |  |                               |                      |
|   | 40 Palafox Place Suite 300   |   |  | _  |  |                               |                      |
|   | Pensacola F  | 32502   |  |  |  |                               |                      |
| hange<br>gent w<br>vas/we<br>he artic     | mited liability company is not organized under the lar<br>or changes are made, the Florida street address of the<br>fill be identical. Or, in the case of a Florida limited li-<br>re authorized by an affirmative vote of the members of<br>less of organization or the operating agreement of the<br>ute of amember or authorized representative of a member | ws of the register ability cof the limited Do | e State of Floed office an ompany, it in this company are the first trick to the first trick to the first trick tr | orida, it is hereby id the business off s hereby confirme y company or as conpany.  Primed or typed nata ocity. I further as | ice of the d that the otherwise me of signce | register<br>change<br>provide | red<br>r(s)<br>rd in |
| provision<br>he obli<br>o mere<br>pripied | ons of all statutes relative to the proper and complete<br>gations of my position as registered agent as provide<br>by reflect a change in the registered office address, I i<br>in writing of this change.  | perform<br>d för in                           | ance of my (<br>Chapter 605  | auties, ana i am ja<br>5. F.S Or. if this a  | ımınar wi<br>locument                        | m ana<br>is beins             | uccepi<br>z filed    |