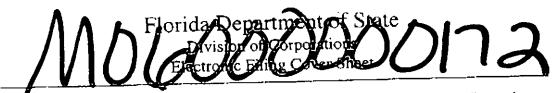
6/12/2018

Division of Corporations



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(((H180001760643)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 : (561)694-1639 Fax Number

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

	,	耳虫	منب. درمه
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LLC REGISTERED AGENT CHANGE LQ MANAGEMENT L.L.C.

DQ Man more		_
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PAGE 02/02

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the limited liability company is: LQ Ma	nagement L.L.C.
2. (a) Principal office address of the limited liability comapny:	
(Note: MUST BE STREET ADDRESS)	IRVING TX 75038
(b) Mailing address of limited liability company:	909 HIDDEN RIDGE, STE 600
(Note: MAY BE POST OFFICE BOX)	IRVING TX 75038
1/11/2906	M06000000172 55
	4. Document number
5.(a) Registered Agent and Registered Office shown	on the records of the Florida Dept of State
	CORPORATION SERVICE COMPANY.
Registered Agent:	**
Registered Office Address:	1201 HAYS.STREET
	TALLAHASSEE FL 32301
	<i>O</i>
(b) Enter name of NEW Registered Agent and/or NEW R	Registered Office address:
NEW Registered Agent:	Corporate Creations Network Inc.
	2000 D (4) Ema Pond #2716
NEW Registered Office Address:	11380 Prosperity Farms Road #221E
(MUST BE FLORIDA STREET ADDRESS)	Palm Beach Gordens Ft 33410
or changes are made, the Florida suect address of the registere	s of the State of Florida, it is hereby confirmed that after the change d office and the business office of the registered agent will be y, it is hereby confirmed that the change(6) was/were authorized by spany or as otherwise provided in the articles of organization or
Nicholas Nichols, Attorney-in-Fact (Printed or Typed name of signes)	
I hereby accept the appointment as registered agent and agree of all statutes relative to the proper and complete performance my position as registered agent as provided for in Chapter 60 in the registered office address, I hereby confirm that the limit Nicholan Nichola, Spe	e to act in this capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obligations of 15, F.S. Or, if this document is being filed to merely reflect a change ted liability company has been notified in writing of this change. **CLAL Secretary** Box 6327, Tallahassee, FL 32314
INHS15(1099)	
Corporate Creations International Inc.	
11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107	