## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## LLC REGISTERED AGENT CHANGE Q CAPITAL HOLDINGS LLC

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6/26/2014

VER LETTER
nited Liability Company
ice Change and fee(s) are submitted for filing.
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Area Code & Daytime Telephone Number  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED ACENTROR $\sim \sim$ BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, Flor company submits the following statement in order to cho both, in the State of Florida.	ida Statutes, the understaned limited Habili unge its registered office or registered agent, t
I. Name of the limited liability company: <b>QCAPITAL HC</b>	DLDINGS LLC
<ol> <li>(a) Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)</li> </ol>	Suite 340
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	New York, NY 10023
12/16/2010	M10000005548 3
3. Date of filing/registration in Florida	4. Document number $\Omega$
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State?
Registered Agent:	CORPORATION SERVICE COMPANY
Registered Office Address:	1201 HAYS STREET
	Suite 200 TALLAHASSEE, FL 32301-2525
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	C T Corporation System
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island Road
	Plantation ,FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature 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 igmiliar with and accept the obligations of my position as registered agent as provided for in Chapter 603, 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 notified in writing of this change.

CT Corporation System

By:

Signature of Registered Agent

By: Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 **FILING FEE: \$25,00** 

INHS18 (12/13)