Division of Corporations

Page 1 of 1

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.

(((H130002116393)))



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

The second section of the second section is the second section of the second section of the second section is the second section of the second section section is the second section s

Division of Corporations

Fax Number : (850) 617-6383

'Account' Name : LEGALZOOM.COM INC'.

Account Number : 120010000062

Phone : (323) 562-8600

Fax Number : (323),962-3989

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

Email Address:

## LLC REGISTERED AGENT CHANGE QEHS3S ASSOCIATES LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

Electronic Piling Menu . Corporate Filing Menu

and the second contract of the second

J. SAULSBERRY 1 ICIDEXAMINER

SEP 25 2013

## COVER LETTER

TO: Registration Section

Division of Corporations

SURJECT. QEHS3S ASSOCIATES LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

imelda Vasquez

Name of Person

Legalzoom.com, Inc.

Firm/Company

100 W. Broadway Suite 100

Address

Glendale, CA 91210

City/State and Zip Code

lynn.gordon@qehs3s.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Imelda Vasquez

,323 \ 962-8600

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

INHS 18 (5/08)

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. Nar	ne of the limited liability company: QEHS3S ASSOC	CIATES LLC
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	950 N Collier Blvd, Ste. 406 Marco Island, FL 34145
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	950 N Collier Blvd, Ste. 406 . Bland, FL 34145
<u>02/07/2</u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	M12000000738
3. Dat	e of filing/registration in Florida	4. Document number
5. (a)	Registered Agent and Registered Office shown on t	7.75
	Registered Agent:	Lynn D Gordon 30 33
	Registered Office Address:	950 N Collier Blvd, Ste. 406 Marco Island, FL 34145
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:
	NEW Registered Agent:	United States Corporation Agents, Inc.
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	13302 Winding Oak Court Sulte A
		Tampa ,FL 33612
confirmand the liabilit the me the ope	imited liability company is not organized under the lined that after the change or changes are made, the Fle business office of the registered agent will be idently company, it is hereby confirmed that the change(s) imbers of the limited liability company or as otherwise rating agreement of the limited liability company.  Leofa member or authorized representative of a member  D. Gordon	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote of
	or typed name of signee	-
	by accept the appointment as registered agent and a with the provisions of all statutes relative to the proviment and accept the obligations of my point for the second of the province of the	gree to act in this capacity. I further agree to per and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.
Signatu	Division of Corporations, P.O. Box 63 FILING FEE: \$2	is, Inc. 27, Tallahassee, FL 32314

INHS18 (05/08)