M17000009595

	(Requestor's Name)	,				
	· , , , , , , , , , , , , , , , , , , ,					
	(Address)					
	/Adda	·				
	(Address)					
	(City/State/Zip/Phone #)					
	(Only/OsatorZipir Horic #)					
_	_	_				
PICK-UP	WAIT	MAIL				
	(Business Entity Name)					
	(Document Number)					
Certified Copies	pies Certificates of Status					
Special Instructions to	Filing Officer:]				
•						

Office Use Only



200382794832

LUATANY OF STATE

2022 HAR -3 PH 3: 35

PARCICHS

MAR 0 4 2022 , ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 51-5660

7737493

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE: February 25, 2022

ORDER TIME : 2:03 PM

ORDER NO. : 515660-079

CUSTOMER NO: 7737493

CHANGE OF AGENT

NAME: Q INTERNATIONAL COURIER, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

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:Q INTERNA	TIONAL (OURIER.	, LLC		
2. (a)	175-28 148th Avenue		(b) 7040 W. 107th Street			
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		. •)	Mailing address of limit (Note: MAY BE POS		-
	Jamaica, NY 11434		Worth,	IL 60482		
	11/09/2017		M17000	0009595		
3.	Date of filing/registration in Florida	4.		Document number		
i. (a)	Cogency Global Inc.					
). (a)	Registered Agent and Registered Office shown on the records	of the Flori	ia Dept. of S	State:		
	115 North Calhoun Street, Suite 4					
	Registered Office Address (MUST BE FLORIDA STREE	TADDRES	<u></u>		202 St.	
					2 H/	
	Tallahassee	3230	 1		2022 HAR -3 SLUNLIAAN TALLAHA	
		FL	<u> </u>			_
(b)					ARY OF	ſ
(b)	Enter name of NEW Registered Agent and/or NEW Register	red Office a	ddress:		F 2	•
					AM II: OL SSEE, FL	•
	Corporation Service Company				;, +	
	NEW Registered Office Address:		_			
	1201 Hays Street					
	Tallahassee	FL_32301				
hange gent v /as/we	imited liability company is not organized under the lor changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the control of the cont	laws of the he register liability of s of the lin	red office : ompany, i nited liabi	and the business office t is hereby confirmed t lity company or as oth	e of the registere	ed (s)
	l Cilmi	Jii	Cilmi, Au	thorized Person		
_	ture of a member or authorized representative of a member			Printed or typed name	-	
l heret rovision he obli o mere otified	by accept the appointment as registered agent and a cons of all statutes relative to the proper and complet igations of my position as registered agent as providely reflect a change in the registered office address, it in writing of this change	gree to ac le perform led for in I hereby c Corporat	t in this ca ance of m Chapter 6 onfirm tha on Service	apacity. I further agre by duties, and I am fam 05, F.S. Or, if this doc at the limited liability o ce Company	e to comply with iliar with and a cument is being company has be	h the sccept filed en