

M18000006645

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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FILED  
18 OCT 30 PM 10:50  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

18 OCT 30 PM 10:49

K. SALY  
OCT 31 2018

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 463722 7979659

AUTHORIZATION :

COST LIMIT :

\$25.00

ORDER DATE : October 29, 2018

ORDER TIME : 9:20 AM

ORDER NO. : 463722-005

CUSTOMER NO: 7979659

CHANGE OF AGENT

NAME: QUICK BRIDGE FUNDING, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Roxanne Turner

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. Name of the limited liability company: Quick Bridge Funding, LLC

2. (a) Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*

(b) Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*

410 Exchange, Ste 150

410 Exchange, Ste 150

Irvine, CA 92602

Irvine, CA 92602

7/12/2018

M18000006645

3. Date of filing/registration in Florida

4. Document number

5. (a) Becky Joly

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

242 Whistling Run, St. Augustine, FL 32092

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

242 Whistling Run

St. Augustine, FL 32092

(b) Corporation Service Company

Enter name of NEW Registered Agent and/or NEW Registered Office address:

1201 Hays Street

NEW Registered Office Address:

Tallahassee, FL 32301

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

Nicholas Roberto, Chief Credit Officer

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 familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, 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.*

Signature of Registered Agent Corporation Service Company BY:

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00

FILED  
18 OCT 30 PM 10:50  
TALLAHASSEE, FLORIDA  
STATE DEPT. OF STATE