## M22000018182

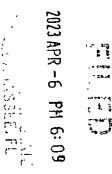
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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04/36/20--01610--007 \*\*25.00



S. FRANKLIN
MAY 2 2 2023

## **COVERLETTER**

•		Section Corporations			
SUBJECT:	Quick :	Furn Engine Center, LLC			
		Name of Forei	gn Limited L	iability Co	mpany
Dear Sir or M	ladam:				
The enclosed	applic	ation, certificate and fee(s	) are submitt	ed for filing	<u>.</u> .
Please return	all cor	respondence concerning th	his matter to	the followi	սճ։
Dustin Vidrine					
		Name of Person			
MainSail Corpr	oate Sc	lutions Inc.			
		Firm/Company	······································	<del></del>	
19241 David M	lemoria	l Drive, Suite 170			
·		Address			
Woodlands, TN	C 77385				
<del> </del>		City/State and Zip Coo	le		
dvidrine@main	sailes.e	om			
E-mail add	ress: (t	o be used for future annua	il report notif	īcation)	
For further in	format	ion concerning this matter	r, please call:		
Dustin Vidrine		-	480 at (	263-23	325
	Nan	e of Person	_	ode & Dayt	ime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclo \$25 Filing		a check for the following ☐ \$30 Filing Fee & Certificate of Status	amount: □ \$55 Fili Certifie		☐ \$60 Filing Fee. Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	on the records of the F	lorida Department of	
State: Quick Turn Engine Center, LLC			
Enter new principal office address, if applicable:			
( <u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u> )			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			2023 APR -6 PM 6: C
2. The Florida document number of this limited liab	ility company is: M220	000018182	PM 6: 09
3. Jurisdiction of its organization:			ف 📑
4. Date authorized to do business in Florida: 12/07/	2022		
SECTION II (5-9 complete only the applicable ch			
5. New name of the limited liability company: (must c	ontain "Limited Liabi	fity Company, " "L.L.C.,"	or "LLC.")
(If name unavailable, enter alternate name adopted for copy of the written consent of the managers or manamust contain "Limited Liability Company," "L.L.C."	ging members adoptin		
6. If amending the registered agent and/or registered registered agent and/or the new registered office add	officer address on our ress here;	records, enter the name o	t the new
Name of New Registered Agent:	_		
New Registered Office Address:	Enter	Florida Street Address	
	Florida		
	City	Ziį	2 Code
New Registered Agent's Signature, if changing Regit I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper at and accept the obligations of my position as register document is being filed to merely reflect a change in	and agree to act in thi nd complete performar ed agent as provided i	ice of my duties, and I am or in Chapter 605, F.S. Oi	familiar with r, if this

If Changing Registered Agent, Signature of New Registered Agent

liability company has been notified in writing of this change,

	- '	acity in accordance with 605.0902 (1)(e), indicate tha EMON AVE., CITY OF INDUSTRY, CA 91789; add	_
Title/ Capacity	<u>Name</u>	Address	Type of Action  ■Add
CEO	Kevin Collins	5300 NW 36th St. Bldg 863	
		Miami, FL 33166	□Remov
Pres/Trea	Mary Ann Sigler	360 North Crescent Dr. South Building	<b>=</b> Add
		Beverly Hills, CA 90210	□Remov
Sec	John Holland	360 North Crescent Dr. South Building	<b>=</b> Add
		Beverly Hills, CA 90210	□Remov
Asst Sec	Barbara Valasco	360 North Crescent Dr, South Building	<b>=</b> Add
		Beverly Hills, CA 90210	□Remov
CFO	Derrick Doud	680 S Lemon Ave	<b>=</b> Add
		City of Industry, CA 91789	□Remov
aforementio		than 90 days old, evidencing the eated by the official having custody of records in the c is organized.	e
	Demek Vant	ature of the authorized representative	

Filing Fee: \$25.00