140600000631

(Requestor's Name) (Address) (Address)	500095876975
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	04/06/0701004015 **35.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	O7 APR -6 AM 8: 36 SECRETARY OF STATE TALLAHASSEE. FLORIDA

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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJE	ECT: Quality Response Solutions, Inc (Name of Cor	poration)
DOCU	MENT NUMBER: N0600000631	
The end	closed Statement of Change of Registered Office/	Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to	o the following:
	Robert Palestrant (Name of Conta	act Person)
	Quality Response Solutions, Inc (Firm/Con	npany)
	13151 S.W. 16th Court (Addre	ss)
	Davie, FL 33325	
	(City/State and	Zip Code)
For fur	ther information concerning this matter, please cal	11:
Robert	t Palestrant (Name of Contact Person)	at (305) 316-4416 (Area Code & Daytime Telephone Number)
Enclose	ed is a \$35.00 check made payable to the Departm	ent of State.
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	inge is submitted for a corporation organized under the laws of the State of Florida
	er to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: Quality Response Solutions, Inc
Davie, FL 3	office address: 13151 S.W. 16th Court
	address (if different): Same as Above
4. Date of incorp	poration/qualification: 01/17/2006 Document number: N06000000631
	d street address of the current registered agent and registered office on file with the tment of State:
	JORGE O CAMPA
	743 NW 174 STREET
·	PEMBROKE PINES, FL 33029
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	ROBERT PALESTRANT 95
	13151 S.W. 16 COURT
	(P.O. Box NOT acceptable)
	DAVIE, FL 33325
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
12	4 MA KOBERT POWNTHANT PROJOCHT/CED
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance and in the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and complete performance and it is a statuted of the proper and it is a statuted of
/ (Sig	gnature of Registered Agent) 4/1/07 (Date)
If signing on be	half of an entity:
Quality Respo	onse Solutions, Inc Typed or Printed Name)
(.	* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)