## POUD00131451

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R. WHITE

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: QUALITY FLOW Comfort Inc. Name of Corporation		
DOCUMENT NUMBER: Po 4000 131451		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Enrique Pascual Name of Contact Person		
QUALITY Flow Comfort, Inc.		
6575 W 4th Ave Nº 406		
Hislah, Florida 33012 City/State and Zip Code		
City/State and Zip Code		
E-mail address: (to be used for future innual report notification)		
For further information concerning this matter, please call:  Fucion Parameter 200 219 00 50		
Enrique Pasoval at (305) 219 - 0650  Name of Contact Person Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the Department 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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of <b>HOBIA</b> in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Quality Flow Comfort, Inc.
2. The principal office address: 6575 W 4 <sup>th</sup> Ave 406 His light, Floraids 33012
3. The mailing address (if different):
4. Date of incorporation/qualification: 09-20-2004 Document number: P04000 131451
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)  Enzique Pascual
Enrique l'Ascual  4445 W 16 <sup>th</sup> Ave 306  Hislish, Florida 33012
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
6575 W 4th Ave 406  P.O. Box NOT acceptable  HIALIAN, Floreds 33012
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board of the corporation has been notified in writing of the change.    Enzique   Ascual
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agen Date
If signing on behalf of an entity:  ETRIGUE PASWAL  Typed or Printed Name

\* \* \* FILING FEE: \$35.00 \* \* \*