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

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COVER LETTER

Division of Corporations
SUBJECT: Quality AT HONE STAULES, INC. (Name of Corporation)
DOCUMENT NUMBER: PO 6 0000 54905
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:
Shages Thibault (Name of Contact Person)
Hollywood BWd. 5Az. 300 5740 Mud Ald + 300 (Address)
Holly wouse (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (954) 962-8200 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

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 Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: QUALITY AT HOME SERVICES, FUC
2. The principal office address: 123 N. ConGRESS AUENUE # 370
Boynton Beach, PC 33426 US
3. The mailing address (if different):
4. Date of incorporation/qualification: 04-18-206 Document number: Po 6000 05 4905
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
SINEK-GARDZIEL, KATAR ZYNA
123 N Congress Avenue # 320
Boynton Deach PL 33426
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
BRIAN ROW
123 N Congress Avance # 320 (P.O. Box NOT acceptable)
Boynton Deach, Pl 33426 . "G
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, or the corporation has been notified in writing of the change.
(Signature of an officer or director) By an Rody Prevident (Printed or typed name and title)
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 Agent) (Date)
If signing on behalf of an entity:
RRia Ross (Typed or Printed Name)

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

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