

11/21/2030 00:49 FAX 8133336388

NICK SPRADLIN

0001/0002

Division of Corporations

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P09000082341

Florida Department of State  
Division of Corporations  
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Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC  
Account Number : I20070000020  
Phone : (813) 435-3176  
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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE  
Q E S TEAM, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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**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: Q E S TEAM, INC.
2. The principal office address: 305 GREY FOX CIR CRESTVIEW FL 32536 US
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/05/2009 Document number: P09000082341

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)

THE LAW OFFICES OF NICK SPRADLIN, PLLC

12000 NORTH DALE MABRY HWY SUITE 110

TAMPA FL 33618

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

THE LAW OFFICES OF NICK SPRADLIN, PLLC

18952 NORTH DALE MABRY HWY SUITE 102

P.O. Box NOT acceptable

LUTZ, FLORIDA 33548

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.

Catherine Spears  
Signature of an officer or director

CATHERINE SPEARS (PRESIDENT)

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.*

Nickolas J. Spradlin  
Signature of Registered Agent

11/09/2012

Date

If signing on behalf of an entity:

NICKOLAS J. SPRADLIN

Typed or Printed Name

\*\*\*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
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