P14000083068

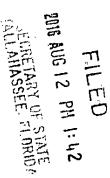
(F	Requestor's Name)	
(A	ddress)	
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(0	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(E	Business Entity Name)	
(Document Number)		
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COVER LETTER

Division of Corporations
SUBJECT: Star Quality Scruice Inc Name of Corporation P14 0000 83068
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:
Name of Confact Person Firm/Company Sobject Address Orlando Florida 32812 City/State and Zip Code Turcios HWO gmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Foliain Turcios and 407, 400, 92/8
Folia Turcios at 407 How 92 8 Name of Contact Person Area Code & Daytime Telephone Number
Englaced is a \$25.00 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 ofFlorido	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: STON Quality Service Inc	
2. The principal office address: 5067 Fayan Street orlando Fl 37812	?
3. The mailing address (if different): 5067 Fayan Street Orlando F1 328/1) -
4. Date of incorporation/qualification: 10-08-7016 Document number: P1400008306	8
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)	
Bobadilla, SayRa Ebronet	
5007 Vayan Street 32812 The 20	
Resigned	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Edwin Ariel Turios teron	
5067 Fayan Street 32812	
P.O. Box NOT acceptable	
Changed	
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.	
Edwin Turcios President	
Signature of an officer of director	
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.	
Edwin T. 10-08-16	
Signature of Registered Agent Date	
If signing on behalf of an entity: Edwin Anci Turcios Zeron	
Typed or Printed Name	

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

CKS PAYARI E TO FLORIDA DEPARTMENT