

PI6000042726

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

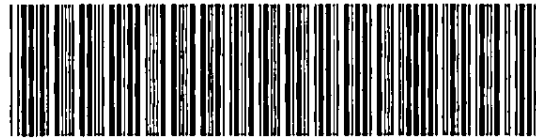
(Business Entity Name)

(Document Number)

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06/25/2021
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Quick + Clean, Inc.
Name of Corporation

DOCUMENT NUMBER: PI6000042726

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:

Kristi Kreitlow
Name of Contact Person

Quick + Clean, Inc.
Firm/Company

500 Capital Circle SE, Suite B1
Address

Tallahassee, FL 32301
City/State and Zip Code

Kristi @ quickandcleaninc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristi Kreitlow at (850) 765 0049
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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: Quick + Clean, Inc.
2. The principal office address: 500 Capital Circle SE, Suite B1
Tallahassee, FL 32301
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 5/18/2016 Document number: P160 000 42726
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)

Kristi Kreitlow
2591 Centerville Road, Suite 205
Tallahassee, FL 32308

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

Kristi Kreitlow
500 Capital Circle SE, Suite B1
Tallahassee FL 32301

P.O. Box NOT acceptable

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.

Kristi Kreitlow

Signature of an officer or director

Kristi Kreitlow

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.

Kristi Kreitlow

Signature of Registered Agent

5/25/21

Date

If signing on behalf of an entity:

Kristi Kreitlow

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 (04/13)