P18000018060

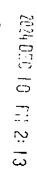
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
umils				





900440468619

12/10/24--01010--023 ***35.00



COVER LETTER

то:	Amendment Section Division of Corporations
SUBJ Name	ECT: QPC INC of Corporation
Name	of Corporation
DOC	UMENT NUMBER: P18000078060
The er	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	The state of the s
Quoc	Pham
Name	of Contact Person
QPC I	NC Control of the con
Firm/0	Company
59121	Breckenridge Pkwy, Suite C
Addre	SS
Tampa	a, FL 33610
City/S	tate and Zip Code
	qa@qpconstructionine.com
E-mai	address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
Quoc	Pham 21 / 813 3956-4123
	Name of Contact Person at (813) 956-4123 Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the Department of State.
	Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/L3)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308. Florida Singe is submitted for a corporation organized under the laws of the State of $\frac{1}{2}$ to change its registered office or registered agent, or both, in the State of Fl	Florid	a	
 The name of t The principal 	he corporation: OPC INC office address: OPC INC Suite C, Tampa, FL 33610			
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 12/3/2024 Document number: P1800007	8060		
	I street address of the current registered agent and registered office on file with tment of State: (If resigned, enter resigned)	h the		
	Peter Q. Pham		~ 1	
	5911 Breckenridge Pkwy, Suite I		230 N33	
	Tampa, FL 33610	•	3 10	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered offi	çe	F:: 2:	
	Quoc Pham	:	$\frac{\alpha}{\omega}$	
	5912 Breckenridge Pkwy, Suite C			
	P.O. Box NOT acceptable Tampa, F1, 33610			
The street addre	ess of its registered office and the street address of the business office of its be identical.	regis	stered a	agent,
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an oboard or the corporation has been notified in writing of the change.	office	r so	
	Peter Pham - President			
Signatu	e of an officer or director Printed or typed name and title	2		
I further agrée t of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and comply with the provisions of all statutes relative to the proper and complet am familiar with and accept the obligation of my position as registered ag filed merely to reflect a change in the registered office address. I hereby the position writing of this change.	olete agen v con	perfor it. Or, firm th	mance if this vat the
	12/3/24			
_	half of an entity:			
n organiz on oc	mar or an entry,			
Ту	yped or Printed Name			

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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