Paccostola

| (Req | uestor's Name) | | |
|---|------------------------|-------------|--|
| (Addi | ress) | | |
| (Adda | ress) | | |
| (City/ | State/Zip/Phon | e #) | |
| PICK-UP | WAIT | MAIL | |
| (Busi | ness Entity Na | me) | |
| | | | |
| (Doci | ument Number |) | |
| Certified Copies | Certificates of Status | | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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2023 JAN 24 PM 3: 58
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2/3/2023

COVER LETTER

TO:

Amendment Section Division of Corporations

| SUBJECT: Quick 'n Clean Inc. Name of Corporation | | |
|--|--|--|
| DOCUMENT NUMBER: | _ | |
| The enclosed Statement of Change of Registered Of | Tice/Agent and fee are submitted for filing. | |
| Please return all correspondence concerning this ma | tter to the following: | |
| David M. Bell | | |
| Name of Contact Person | | |
| Firm/Company 10201 Spyglass Way | | |
| Address Boca Raton, FL 33498 | | |
| City/State and Zip Code | | |
| proshinecw@gmail.com | | |
| E-mail address: (to be used for future annual rep | port notification) | |
| For further information concerning this matter, please | se call: | |
| David Bell | 561-221-4295 | |
| Name of Contact Person | Area Code & Daytime Telephone Number | |
| Enclosed is a \$35.00 check made payable to the Dep | partment of State. | |
| Mailing Address: Amendment Section | Street Address: Amendment Section | |
| Division of Corporations | Division of Corporations | |
| P.O. Box 6327 | The Centre of Tallahassee | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stat inge is submitted for a corporation organized under the laws of the State of <mark>Flori</mark> er to change its registered office or registered agent, or both, in the State of Flor | ida | his —— | |
|-------------------------------|---|-------------------|-------------------------|-------------------------|
| | Ouick 'n Clean Inc 10201 Spyglass Way office address: | | | |
| 3. The mailing a | | | | |
| 4. Date of incor | address (if different): July or August 2019 poration/qualification: Document number: | | | |
| | d street address of the current registered agent and registered office on file with tertment of State: (If resigned, enter resigned) | the | | |
| | Jeffrey Feinberg | (Ü) | 202 | |
| | 4651 Sheridan St Suite 200 | 157 177 177 | 2023 JAN 2 | |
| | Hollywood, FL 33021 | | F | [7] |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered office | i- io. 空 | PH 3: 5 | 9 to |
| | David M.Bell | 177 | œ | |
| | 10201 Spyglass Way | | | |
| | P.O. Box NOT acceptable Boca Raton, FL 33498 | | | |
| The street addr | ess of its registered office and the street address of the business office of its related to the business of the business of the business of its related to the identical. | egistei | red aş | gent, |
| Such change wauthorized by t | as authorized by resolution duly adopted by its board of directors or by an off he board of the corporation has been notified in writing of the change. Printed or typed name and title | | ა | |
| | 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 completed and familiar with and accept the obligation of my position as registered aging filed merely to reflect a change in the registered office address. I hereby a speen notified the writing of this change. | | rform Or, i n tha | ance f this t the |
| | chalf of an entity: | | | |
| DAU I | DMBELL— Typed or Printed Name | | | |

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