

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:		. ; a
	Division of Corporations	, , , <u>, , , , , , , , , , , , , , , , </u>
	Fax Number : (850)617-6380	
		で <u>つ</u>
From:		
	Account Name : C T CORPORATION SYSTEM	ं 🛅
	Account Number : FC4000000023	
	Phone : (614)280-3338 Fax Number : (954)208-0845	
	(334)200 0043	
**Enter	the email address for this business entity to be used for f	uture
**Enter	the email address for this business entity to be used for f ual report mailings. Enter only one email address please.*	uture

REGISTERED AGENT CHANGE MQ WINDOWS, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$43.75

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Corporate Filing Menu

Help

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

statement of che	ange is submitted for a corporati	, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ion organized under the laws of the State of FL or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: MQ WINDOWS	i, INC.	
	office address: 1855 GRIFFIN R	rd. Suite C-214	
3. The mailing a			
4. Date of incor	poration/qualification: 05/09/19	94 Document number: P94000034850	
	d street address of the current represents of State: (If resigned, enti-	gistered agent and registered office on file with the er resigned)	
	MORIN, GILLES	~	
	1988 COLEUNIUS CLUEU C SI	SECTION JUL	en:1
	DANIA, FL 33004		#== 1"-
6. The name and (if changed):		tered agent (if changed) and /or registered office	
	C T Corporation System	<u>후</u> 연기	
	c/o C T Corporation System, 120	0 South Pine Island Road	•
		O. Box. NOT acceptable	
	Plantation, Florida 33324		
The street address changed will	ess of its registered office and to be identical.	he street address of the business office of its registered agent.	
Such change is authorized by if	as yuthorized by resolution duly he hoped, or the corporation has	y adopted by its board of directors or by an officer so been notified in writing of the change.	
/ill		Alan E. Bernick, SVP, Chief Legal Officer	
I hereby accept I further agree performance of	the appointment as registered to comply with the provisions o my duties, and I am familiar w	critica wyper seme and title agent and agree to act in this capacity, of all statutes relative to the proper and complete ith and accept the obligation of my position as registered ity to reflect a change in the registered office address. I notified in writing of this change.	
By: $\frac{7}{4} \cdot \frac{1}{5}$.	poration System	05/14/2019	
518	muture of Registered Agent	Date	
If signing on bo	half of an entity:		
	, Asst Secretary yped or Printed Nume	in the same of the	
	* * * FIL	ANG FEE: \$35.00 * * *	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)