## P97000081339

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
•							
PICK-UP WAIT MAIL							
(Business Entity Name)							
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 29, 2008

QUESCO, INC. C/O STEARNS WEAVER 200 E. LAS OLAS BLVD., 2100 FORT LAUDERDALE, FL. 33301 US

SUBJECT: QUESCO, INC. Ref. Number: P97000081339

Our records indicate the registered agent for the above named corporation resigned on August 25, 2008 and that the corporation currently does not have a registered agent designated.

Chapter 607/617, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a corporation for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named corporation 60 days from the date of this letter if a registered agent is not properly designated.

Please designate a new registered agent by doing one of the following: 1) complete the enclosed registered agent designation form, 2) file the current year annual report (if applicable) or 3) file an amended annual report (again, if applicable). Each one of these filings must be submitted with the appropriate filing fee.

If you should need any further information, please contact our office at (850) 245-6050.

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Carol Mustain
Regulatory Specialist II
Division of Corporations

Letter number: 908A00048042

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

अंदेश कर महास्वेदकार जे हाजब अन्याद है। है में उन्हों के प्रजान के महास्वेद कि है तह है

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

Pursuant to the prostatement of chang in order to	•	· a corporation o	organized una	ler the laws o	of the State of		-
1. The name of the	corporation:	QUESCO	. INC.				
2. The principal of	fice address: /E		UNIVER		<del>-</del>		
3. The mailing add		19725.	····	N WAY	#160 91306	,	
4. Date of incorpor	ation/qualification					970000	81339
5. The name and st Florida Departm	reet address of th	•	•				<del></del>
6. The name and st	reet address of th	a new registered			r registered of	ALLAHASSI ALLAHASSI	08 OCT 31
(if changed):		_	ERVICES		·	F. FLO	
	17888		COURT		<u> </u>		27
	_	(P.O. Box NOT acco	eptable)		· · · · · · · · · · · · · · · · · · ·	<del></del>	
The street address as changed will be	of its registered identical.	office and the s	treet address	of the busir	ess office of	its registered	agent,
Such change was a authorized by the	authorized by reboard, or the cor	solution duly ad poration has be	lopted by its en notified ir	board of dire	ectors or by a the change.	n officer so	
<u> </u>	of an officer or directo	r)	4	dichael (Printed	Giette or typed name and	d title)	
I hereby accept the I further agree to of my duties, and I document is being corporation has be	comply with the ' am familiar wii filed merely to i	provisions of al h and accept th reflect a change	l statutes rela e obligation in the regist	to act in thi ative to the p of my position ered office a	s capacity. Proper and co On as register Uddress, I here	mplete perfor ed agent. Or eby confirm ti	rmance ; if this hat the
(Signat	ure of Registered Age	<u>ll</u>			0/24/01 (Date)	8	
Janice A	•	rehalf of	1 Incor	p Ser	vices,	Ine.	
		* * * FILIN	G FEE: \$35	.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)