## F0400000535

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☐ WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer:				
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Office Use Only



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APR 1.7, 2014

R. WHITE



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Holmes aholmesl@cscinfo.com

Date: April 9, 2014

Order#: 084017-010

Re: JAMES BROWN TRUCKING COMPANY

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Anthony Holmes c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of ch	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florid on organized under the laws of the State of or registered agent, or both, in the State of	of Georgia	
I. The name of	the corporation: JAMES BROWN	N TRUCKING COMPANY	oj rioriaa.	
2. The principa	l office address: 6908 Chapman I	Road., Lithonia, GA 30058		
3. The mailing	address (if different):			
4. Date of incom	rporation/qualification: 01/26/200	Document number: F0400	00000535	
	nd street address of the current regartment of State: (If resigned, enter	gistered agent and registered office on file or resigned)	with the	
	Thompson, Troy			
	6200 Soutel Drive			
	Jacksonville	FL 32219		
6. The name an (if changed):		ered agent (if changed) and /or registered	office	
	Corporation Service Company			
	1201 Hays Street			
	P.O. Box NOT acceptable			
	Tallahassee	FL 32301	<del></del>	
The street addr as changed wil	ress of its registered office and the libe identical.	ne street address of the business office of	f its registered agent,	
Such change wanthorized by t	vas authorized by resolution duly the board, corporation has	adopted by its board of directors or by a been notified in writing of the change.	an officer so	
	8	Dona Priebe		
Signat	ure of an officer or director	Printed or typed name and	Title	
I further agree performance o agent. Or, if the hereby confirn	to comply with the provisions of fmy duties, and I am familiar wi	agent and agree to act in this capacity, fall statutes relative to the proper and cith and accept the obligation of my positly to reflect a change in the registered of outfield in writing of this change.	ion as registered	
By: Selvi	aneppet	04/09/2014		
Si	gnature of Registered Agent	Date	<del></del>	
If signing on b	ehalf of an entity:			
Sylvia Queppe	et, Assistant Vice President			
-	Typed 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 \* \* \*