

L04000075622

(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:

Office Use Only



500254917835

12/27/13--01031--008 \*\*630.00

RECEIVED  
13 DEC 27 AM 11:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ZP&W Logistics, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Leon N. Patricios**

Name of Person

**ZP&W Logistics, LLC**

Firm/Company

**312 Minorca Ave.**

Address

**Coral Gables, FL 33134**

City/State and Zip Code

**lpatricios@zpwlaw.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Leon N. Patricios** at ( **305** ) **444-5565**  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

