

LZ1000 170841

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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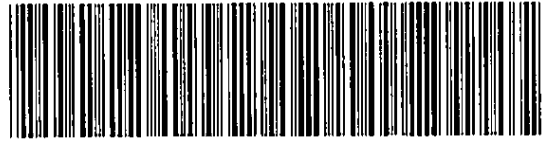
(Business Entity Name)

(Document Number)

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2021 JUN 23 AM 9:35  
TALLAHASSEE, FL

JUL 21 2021  
C Kinsey

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Macen Transports LLC  
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Isamari SASSO  
(Contact Person)

A.N.I. Services LLC  
(Firm/Company)

1008 Vista Palma Way  
(Address)

Orlando FL 32825  
(City/State and Zip Code)

For further information concerning this matter, please call:

Isamari SASSO at (407) 723-3069  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:  
 \$25 Filing Fee                       \$55 Filing Fee & Certified Copy

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

Name of the limited liability company: Macun Transports LLC

2 (a) 836 W LANCASTER RD (b) 836 W LANCASTER RD  
 Principal office address of limited liability company: Mailing address of limited liability company:  
 (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

Orlando FL 32809 Orlando FL 32809

4/13/21 L21000170841  
 Date of filing/registration in Florida 4. Document number

3 (a) Jose J. Velez Santana  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
836 W LANCASTER RD  
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Orlando FL 32809

(b) Isamari Sasso  
 Enter name of NEW Registered Agent and/or NEW Registered Office address:  
1028 Vista Palma Way  
NEW Registered Office Address:

Orlando FL 32825

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Jose Velez Santana Jose Velez Santana  
 Signature of a member or authorized representative of a member Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Isamari Sasso  
 Signature of Registered Agent