P06000121568

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R.A. Charge

C. Coultiette AUG 0 3 2007

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: IZZY RAY T	RUCKING, INC.	A-100 A 100 A
DOCUMENT NUMB	ER: P06000121568	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles of	of Amendment and fee a	re submitted for filing.	
Please return all corresp	oondence concerning thi	s matter to the following:	
Isabel M	lartino		
<u></u>		of Contact Person)	
Izzy Ra	y Trucking, Inc.		
	(Fir	m/ Company)	· ·
13707 L	azy Oaks Drive		
		(Address)	
Tampa F	FL 33613		
	(City/ S	tate and Zip Code)	
For further information	concerning this matter,	please call:	
Isabel Martino (Name of Contact Person)		at (<u>813</u>) <u>283-8745</u> (Area Code & Daytime T	<u> </u>
Enclosed is a check for	the following amount:		
☑ \$35 Filing Fee [\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addre Amendment Se Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir	cle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 17, 2007

SAbe / ISABLE MARTINO IZZY RAY TRUCKING, CORP 13707 LAZY OAKS DR TAMPA, FL 33613

SUBJECT: IZZY RAY TRUCKING, CORP.

Ref. Number: P06000121568

We have received your document for IZZY RAY TRUCKING, CORP. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Document Specialist

Letter Number: 007A00045099

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COVER LETTER

TO:	TO: Amendment Section Division of Corporations				
SUBJI	BJECT: IZZY RAY TRUCKING, CORP. (Name of Corporation)				
DOCU	CUMENT NUMBER: P06000121568				
	enclosed Statement of Change of Registered Office/Agent and fee	are submitted for filing.			
Please	se return all correspondence concerning this matter to the followin	g:			
	ISABEL MARTINO (Name of Contact Person)				
(Firm/Company)					
13707 LAZY OAKS DR. (Address)					
TAMPA FL 33613					
	(City/State and Zip Code)				
For fu	further information concerning this matter, please call:				
ISABI	BEL MARTINO at (813 (Area Co) 283-8745 de & Daytime Telephone Number)			
Enclos	losed is a \$35.00 check made payable to the Department of State.				
	Amendment Section Ame Division of Corporations Divi P.O. Box 6327 Clift Tallahassee, FL 32314 2661	et Address: Indment Section Ission of Corporations Industry Indust			

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

		rganized under the laws of the State of FLORIC egistered agent, or both, in the State of Florida.	<u> </u>
1. The name of	the corporation: IZZY RAY TRUCKIN	NG, CORP.	
2. The principal	office address: 6518 JOHN RD TA	MPA FLORIDA 33634	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification:	Document number: P06000121568	
	d street address of the current register rtment of State:	red agent and registered office on file with the	
	ISABEL MARTINO		
	13707 LAZY OAKS CORP.	•	 1
	TAMPA FL 33613		07 AUG SECRET ALLAH
6. The name and (if changed):	d street address of the new registered	agent (if changed) and /or registered office	-2 FARY ASSE
	RAYDEN MIGUEL		S 40
	6518 JOHN RD	ptable)	TATE ORID
	(P.O. Box NOT acce	ptable)	Þ
	TAMPA FL 33634	<u> </u>	
The street address changed will	ess of its registered office and the st be identical.	treet address of the business office of its registe	ered agent,
Such change wanthorized by t	as authorized by resolution duly adhe board, or the corporation has bee	opted by its board of directors or by an officer in notified in writing of the change.	so
paleil	Metlew	ISABEL MARTINO PRE (Printed or typed name and title)	
	the appointment as registered agen to comply with the provisions of all ad I am familiar with and accept the ing filed merely to reflect a change is been notified in writing of this cha	nt and agree to act in this capacity. I statutes relative to the proper and complete p I obligation of my position as registered agent In the registered office address, I hereby confi Inge.	erformance . Or, if this rm that the
	Rayden Miguel gnature of Registered Agenty	7-31-07	
WAT !	gnature of Registered Agenty	(Date)	
If signing on be	chalf of an entity:		

APPKOVE AND FILED

* * * FILING FEE: \$35.00 * * *