## P05 000136787

(Requestor's Name)				
(Address)				
(100.000)				
(City/State/Zip/Pho	one #1			
(only-card-light hone ii)				
PICK-UP WAIT	MAIL			
(Business Entity N	ame)			
(Document Number)				
Certified Copies Certificat	tes of Status			
Consideration to Filian Officer				
Special Instructions to Filing Officer:				

Office Use Only



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S TALLENT MAY 2 2 2018 THE STAY 17 AND STA

P/A-CH

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

statement of cha	provisions of sections 607.0502, 617.050 nge is submitted for a corporation organ r to change its registered office or regist	tized under the laws of the State of $rac{F}{}$	LORIDA
1. The name of t	he corporation: QUICKWAY TRAI	NSPORT INC	
2. The principal	office address: 8216 AMBACH W XO, FL 33462	AY BUILDING 1	
-	ddress (if different):		
4. Date of incorp	poration/qualification: 10/16/2007	10/06/2005 p05000	0136787
5. The name and Florida Depar	I street address of the current registered a tment of State: (If resigned, enter resign	ngent and registered office on file wited)	th the
	IRENE MEISSNER		
	8216 AMBACH WAY BUILD	ING 1 <sup>-D</sup>	co co
	HYPOLUXO, FL 33462		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	FREDDY ESPINOZA		7 <b>5</b>
8216 AMBACH WAY BUILDING 1			,
	HYPOLUXO, FL 33462	l'acceptable	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its	registered agent.
Such change wa authorized by th	ns authorized by resolution duly adopte ne board, or the corporation has been no	d by its board of directors or by an obtified in writing of the change.	officer so
-	n	FREDDY ESPINOZA	P
I hereby accept I further agree of performance of awant. Or if th	the appointment as registered agent an to comply with the provisions of all sta- my duties, and I am familiar with and a is document is being filed merely to ref that the corporation has been notified	nd agree to act in this capacity. tutes relative to the proper and com accept the obligation of my position loct a change in the registered office	
~.~		04/18/2018	
Sig	nathrely Registered Agent	Date	
If signing on be	half of an entity:		
Freddy	ESPINOZA yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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