

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000010188

Entity Name: JZ EXPEDITED LOGISTICS, LLC

Current Principal Place of Business:

9601 NORTH MAIN STREET DRIVE
SUITE 1
JACKSONVILLE, FL 32218

Current Mailing Address:

9601 NORTH MAIN STREET DRIVE
SUITE 1
JACKSONVILLE, FL 32218 US

FEI Number: 26-3690393

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRAWFORD, JOHN R
1200 RIVERPLACE BLVD. STE. 800
JACKSONVILLE, FL 32207 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN R. CRAWFORD

02/16/2018

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER, PRESIDENT
Name FOX, ROBERT
Address 9601 NORTH MAIN STREET DRIVE
 SUITE 1
City-State-Zip: JACKSONVILLE FL 32218

Title ASSISTANT MANAGER
Name FOX, ZACHARY
Address 9601 NORTH MAIN STREET DRIVE
 SUITE 1
City-State-Zip: JACKSONVILLE FL 32218

Title SECRETARY
Name SMITH, PHALLY
Address 9601 NORTH MAIN STREET DRIVE
 SUITE 1
City-State-Zip: JACKSONVILLE FL 32218

Title MANAGER, VP
Name FOX, MARIA
Address 9601 NORTH MAIN STREET DRIVE
 SUITE 1
City-State-Zip: JACKSONVILLE FL 32218

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT FOX

MANAGER

02/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date