

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000010188

**Entity Name:** JZ EXPEDITED LOGISTICS, LLC

**Current Principal Place of Business:**

3263 SOUTHSIDE BLVD  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

3263 SOUTHSIDE BLVD  
JACKSONVILLE, FL 32216 US

**FEI Number:** 26-3690393

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FOX, ZACHARY  
3263 SOUTHSIDE BLVD  
JACKSONVILLE, FL 32216 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:** ZACHARY FOX

02/09/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           FOX, ROBERT L  
Address        3263 SOUTHSIDE BLVD  
City-State-Zip: JACKSONVILLE FL 32216

Title           MANAGER  
Name           FOX, ZACHARY  
Address        3263 SOUTHSIDE BLVD  
City-State-Zip: JACKSONVILLE FL 32216

Title           SECRETARY  
Name           MATTHEWS, GLORIA  
Address        12813 COOL WATER WAY  
City-State-Zip: JACKSONVILLE FL 32216

*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 L. FOX

MANAGER

02/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date