

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274

Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

REGISTERED AGENT CHANGE INTER-RAIL TRANSPORT, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

30.35

→ 18506176380

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COVER LETTER

TO: Amendment Section Division of Corporations

Inter-Rail Transport, Inc.
SUBJECT:
Name of Corporation

DOCUMENT NUMBER: 636210

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Contact Person Registered Agent Solutions, Inc. Firm/Company Corporate Center Onc, 5301 Southwest Pkwy, Ste 400 Address Austin, Texas 78735

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lori Whalen

Name of Contact Person

at (888) 705-7274

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

statement of cha	provisions of sections 60: nge is submitted for a co r to change its registered	rporation organ	ized under the law:	s of the State of	Florida	
1. The name of t	he corporation: Inter-R	ail Transpo	rt, Inc.	,		
2. The principal	office address: 115 L	AWYERS	ROW CENTR	REVILLE, M	/ID 21617	
3. The mailing a	ddress (if different):					<u> </u>
4. Date of incorp	oration/qualification: 9/	14/1979	Document nu	umber: <u>63621</u>	0	
	street address of the current of State; (If resigned			office on file w	vith the	
	TRAC - THE RE	GISTERE	D AGENT CO	DMPANY	_	
	236 E.6th Avenue	•			- ㅋ 말	
	Tallahassee, FL 3	2303			TALLAHASSI	77
6. The name and (if changed):	street address of the new			or registered of	HASSEE.	
	Registered Age	nt Solution	ns, Inc.		ברס פון נוס	جَ جَ
	2894 Remingto				RIDE	<u> </u>
	Tallahassee	P.O. Box F.L	NOT acceptable 32308		_	
The street addre as changed will	ss of its registered office be identical.	and the street	address of the busi	iness office of i	ts registered a	igent,
Such change wa authorized by th	s authorized by resolution board, or the corporation	on duly adopted on has been no	by its board of di tified in writing of	rectors or by an the change.	officer so	
/s/ Jaclyn	Wright		Jaclyn Wright	or typed name and t	Authorized	Person
l further agree t of my duties, and document is beu	the appointment as regis o comply with the provis d I am familiar with and ny filed merely to reflect been notified in writing	ions of all stati accept the obli a change in the	ites relative to the	proper and cor	mplete perfort ed agent. Or by confirm the	nance if this at the
Ma	الله مزوم		11/29/2023			
Sign	sature of Registered Agent			Date		
If signing on bel	nalf of an entity:					
	r, Assistant Secretary					
Гу	ped or Printed Name * *	* FILING EF	F: \$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)