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R.A. Change

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TRANSMITTAL LETTER

Knight Transportation, Inc. SUBJECT:__ (Name of corporation) DOCUMENT NUMBER:_ 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: Gerald J. Essick (Name of person) Knight Transportation, Inc. (Name of firm/company) 5601 W. Buckeye Road (Address) Phoenix, AZ 85043 (City/state and zip code) For further information concerning this matter, please call: Gerald J. Essick (Area code & daytime telephone number) (Name of person) Enclosed is a \$35.00 check made payable to the Department of State. Street Address:
Amendment Section
Division of Corporations Mailing Address:
Amendment Section

409 E. Gaines Street

Tallahassee, FL 32399

CR2E045(07/02)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

Amendment Section Division of Corporations

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

Pursuant to the	e provisions of s	ections 607.0502, 6	517.0502, 607.15	08, or 617.1508, i	Florida Statutes,
this statement o	=	iitted for a corporat	_	_	•
Arizona	in order	to change its registe	ered office or reg	istered agent, or l	ooth in the State
of Florida.					問言「
1. The name of	the corporation:	Knight Transportation	, Inc.		
2. The principal	l office address:_	5601 W. Buckeye Roa	id, Phoenix, AZ 850	143	ا جری
					F 9
	(10.1100				10 5 S
3. The mailing	address (if differ	ent):			BH -
					_
4. Date of incor	poration/qualific	ation: <u>08/16/20</u> 04	Docum	nent number: <u>PO</u>	4000004752
	d street address or rtment of State:	of the current registe	red agent and reg	istered office on fi	le with the
•		Mark M	IcNally		
1314 George Jenkins Blvd.					
		Lakeland, FL	33815-1300		-
6. The name ar changed):	nd street address	of the new registe	- ,	nged) and /or reg	- istered office (if
		C T Corpora	tion System		_
		c/o C T Corpo	ration System		
	1000	(P.O. Box or personal ma		22224	-
	1200	South Pine Island Roa	d, Plantation, Florida	1 33324	
agent, as chang	ed will be identi	red office and the st cal.			_
Such change was authorized by the	1	resolution duly add corporation has bee	pted by its board n notified in writ D	of directors or by ing of the change. ave Jackson, CFO	an officer so
(Signature of an officer		man of the board)	(or typed name and title)	
I further agree performance of registered agen office address,	to comply with to my duties, and it. Or, if this doe I hereby confirm	t as registered agen he provisions of all I am familiar with a cument is being file to that the corporation	statutes relative and accept the ob- id merely to reflec	to the proper and ligation of my pos t a change in the i	ition as registered
By: / relu	Corporation System	/ ree	<u> 10 - z</u>	9-04	
(9	ignature of Registered	(gent)		(Date)	
If signing on behalt	If of an entity: Mallernee 1	Asst. Sec. 1	Asst. S	Secu.	
	Typed or Printed Name)			(Capacity)	

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