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R. WHITE



CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Jodette Hamilton jhamilt2@cscinfo.com

Date: January 15, 2014

Order#: 864787/015

Re: TOTAL TRANSPORTATION SERVICES, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Jodette Hamilton c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

statement of ch	ange is submitted for a corporation org	502, 607.1508, or 617.1508, Florida Stati canized under the laws of the State of <u>Cal</u> li istered agent, or both, in the State of Flori	ornia		
1. The name of	the corporation: Total Transportation S	Services Inc.			
	office address: 7316 Edgwater Dr				
Orlando FL					
	address (if different): 18735 S Ferris Pi Dominguez, CA 90220	L			
		Document number: F110000037	20		_
	nd street address of the current registered artment of State: (If resigned, enter resig	d agent and registered office on file with the	ne		
	NRAI Services, Inc.				
	1200 South Pine Island Road				
	Plantation,	FL 33324	'm l.o		
6. The name an (if changed):		gent (if changed) and /or registered office		排	
	Corporation Service Company			<u></u>	;
	1201 Hays Street			70	•
	P.O. Box N	OT acceptable			
	Tallahassee	FL 32301	3.	$\overline{\Box}$	
The street addr as changed wil	ress of its registered office and the stre l be identical.	et address of the business office of its reg	gistered a	gent,	
Such change wauthorized by t	ras authorized by resolution duly adopt the board, or the corporation has been i	ted by its board of directors or by an officentified in writing of the change.	er so		
Marin	Margaret M. Movius		FO		
(T	ure of an officer or director	Printed or typed name and lifle		-	
I further agree performance of agent. Or, if th hereby confirm	f my duties, and I am familiar with and	atutes relative to the proper and complet I accept the obligation of my position as effect a change in the registered office ag	registere	d	
By: detti Y	Samel Assistant VP	1-15-2014			
Si	gnature of Registered Agent	Date			
If signing on be	ehalf of an entity:				
Corporation Se	ervice Company				
	Typed or Printed Name				

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