Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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Account Number: FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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<u>(1)</u> U (7)

"

REGISTERED AGENT CHANGE USA TRUCK, INC.

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AUG ~ ,

By:

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

statement of cha	provisions of sections 607.0502, 617.05 unge is submitted for a corporation orgo er to change its registered office or regis	anized under the laws of the State of $\underline{\mathrm{D}}$	elaware
	the corporation: USA Truck, Inc.	net as region, or born, in the place of 1 is	nati.
2. The principal	office address: 3200 Industrial Park Roa	d, Van Buren AR 72956	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 05/01/2015	Document number: F15000001	881
	d street address of the current registered tment of State: (If resigned, enter resign		ı the
	Capitol Corporate Services, Inc.		
	515 East Park Avenue, 2nd FL		
	Tallahassee, FL 32301	-	
6. The name and (if changed):	C T Corporation System 1200 South Pine Island Road	ent (if changed) and /or registered offic	20 1.15 2b
		ox. NOT acceptable	. 7
	Plantation, Florida 33324		ローフ
The street address changed will	ess of its registered office and the stree be identical.	t address of the business office of its	registered agent,
Such change wa authorized by th	is authorized by resolution duly adopte the board, or the corporation has been n	ed by its board of directors or by an of otified in writing of the change.	fficer so
2-	5 4	Brian Card - Corporate Controller	
_	e of an officer or director	Printed or typed name and title	
I hereby accept I further agree to of my duties, an document is beil corporation has CT Corporation	the appointment as registered agent a to comply with the provisions of all sta d I am familiar with and accept the obing filed hierely to reflect a change in the patified in writing of this change. System	ne regisierea office daaress, 1 nereoy e.	lete performance agent. Or, if this confirm that the
	Men # Willio nature of Registered Agent	08/26/2020 Date	
If signing on be	half of an entity:		
	Asst. Secretary ped or Printed Name		
	* * * FILING F	EE: \$35.00 * * *	

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