## F17000007399

(Reque	estor's Name)	<del></del>
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
. (Busin	ess Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		





800317586368

09/04/18--01034--021 \*\*35.00

racry

R. WHITE SEP 1 0 2018 ECRETARY OF STATE



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscqlobal.com

Date: August 30, 2018

Order#: 362265-018

Re: HOLT LOGISTICS CORP.

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 Please return evidence to the following:

Attn: Anthony Arthur c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

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

QUCA.XCOA

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

statement of cha	nge is submitted for a corp	0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this oration organized under the laws of the State of NJ flice or registered agent, or both, in the State of Florida.	
1. The name of t	he corporation: HOLT LOG	SISTICS CORP.	
	office address: ST GLOUCESTER CITY I	ทา 08030	
3. The mailing a	ddress (if different):		
4. Date of incorp	ooration/qualification: 05/1	9/2017 Document number: F17000002299	
	street address of the current tment of State: (If resigned	nt registered agent and registered office on file with the , enter resigned)	
	CT CORPORATION SYS		
	1200 S PINE ISLAND RD	SECRE SI	
	PLANTATION	FL 33324	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered of the second of the new registered agent (if changed) and /or registered of the second of th		
	Corporation Service Com	pany	
	1201 Hays Street		
	Tallahassee	P.O. Box NOT acceptable	
		FL 32301	
The street addre as changed will	ss of its registered office a be identical.	nd the street address of the business office of its registered agent.	
Such change wa authorized by th	s authorized by resolution e board, or the corporation	duly adopted by its board of directors or by an officer so has been notified in writing of the change.	
<u> </u>	Conce e of an officer or director	Jill Cilmi, Vice President	
		Printed or typed name and title	
I further agree to performance of to agent. Or, if this hereby confirm t	o comply with the provisio my duties, and I am familia s document is being filed n	red agent and agree to act in this capacity. This of all statutes relative to the proper and complete This of all statutes relative to the proper and complete This is a registered This is a registered office address, I This is a registered office address, I This is a registered office address of this change.	
By: X	co Cokubi	08/30/3018	
age. If signing on bel	arare of registered regent	Date	
	Assistant Vice President		
	ped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
5 (03/12)

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