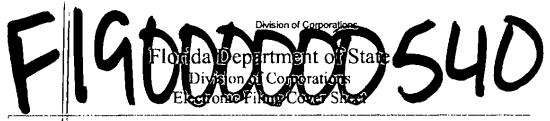
2021-08-06 10:42:32 CST

19542080845

From: Ranae McGraw

8/6/2021



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(((H210002979763)))



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To:

Division of Corporations

Fax Number : (850)617-6380

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

; (514)280-3338

Fax Number

: (954)208-0845

2824 AUG - 6

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

Email Address:_

(17)

REGISTERED AGENT CHANGE BIG C FREIGHT, INC.

	فاختناه فالمراجب والمستنب فأخف والمراجب والمناسب
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S. PRATHER

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Corporate Filing Menu

Help

To: 18506176380*

FOR CORPO		FRICE OR REGISTERED AGENT OR BOTH	
	orovisions of sections 607.0502, 617.0502,	607.1508, or 617.1508, Florida Statutes, this	
statement of cha	nge is submitted for a corporation organiz	ed under the laws of the State of Georgia	
in orde	t to change its registered office or register	ed agent, or both, in the State of Florida.	
1. The name of t	the corporation: BIG C FREIGHT, INC.		
3. The principal	office address: 1673 J Frank Culpepper Rd,	Lake Park, GA 31636	
2. The principal	office address.		
3. The mailing a	uddress (if different): 2310 G North Patterso	in St, Valdosta, GA 31602	
4. Date of incorp	poration/qualification: 01/25/2019	Document number: F19000000540	
	d street address of the current registered agreement of State: (If resigned, enter resigned		
ľ	Cary Watkins (resigned)		
• •	134 Deer Lake Cir		
	Ormond Beach, FL 32174		
6. The name and (if changed):	d street address of the new registered agent	(if changed) and /or registered office	2021 AUI
I	C T Corporation System	1.55 1.555	1
,	1200 South Pine Island Road	177° c	b An
İ	P.O. Bax Plantation, Florida 33324	NOT acceptable	ب بزر
The street address changed will	ess of its registered office and the street a	ddress of the business office of its registered agent,	`
•		by its board of directors or by an officer so ified in writing of the change.	
01.1/ L	.	Phil Corbett	
April Office	ure of an officer or director	Printed or typed name and title	
I hereby accept I further agree of my duties, an document is be corporation ha	the appointment as registered agent and to comply with the provisions of all statu nd I am familiar with and accept the oblis ing filed merely to reflect a change in the s been notified in writing of this change.	l agree to act in this capacity. tes relative to the proper and complete performance gation of my position as registered agent. Or, if this registered office address, I hereby confirm that the	
Chimain ATA	Chatrine Halts Apostural fluoratory	08/05/2021	
- 11	grature of Registered Agent	Date	
	ehalf of an entity:		
[] Christine	-		
	Typed or Printed Name		
	* * * FILING FE	E: \$35.00 * * *	
	MAKE CHECKS PAYABLE TO FLO		
CR2E045 (04/13)	IAIL TO: DIVISION OF CORPORATIONS, P.	O. Box 6327, Tallahassee, FL 32314	

By: