F1900CC04174

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJI Name	ECT: Duane Kottke Trucking Corporation of Corporation			
DOCU	JMENT NUMBER: F19000004174			
The en	closed Statement of Change of Registered	Office/Agent and fee are submitted for filing.		
Please	return all correspondence concerning this r	matter to the following:		
_	t C. Anderson, Esq.			
	of Contact Person			
-	y, Kosanda & Zimmer, P.A.			
	Company			
	ghway 169 N, Suite 350			
Addres				
_	apolis, Minnesota 55441			
City/Si	tate and Zip Code			
	banderson@ckzlawfirm.com			
E-mail address: (to be used for future annual report notification)				
For fur	ther information concerning this matter, pl	ease call:		
Bridge	t C. Anderson, Esq.	at (763) 398-0441		
	Name of Contact Person	at (763) 398-0441 Area Code & Daytime Telephone Number		
Enclos	ed is a \$35.00 check made payable to the D			
	Mailing Address:	Street Address:		
	Mailing Address: Amendment Section	Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of ch	ange is submitted for a corpora	22, 617.0502, 607.1508, or 617.1508, Florida Statutes, this attion organized under the laws of the State of Minnesota e or registered agent, or both, in the State of Florida.		
	the corporation: Duane Kottke			
2. The principa	office address: 211 Highway 2	12 East		
3. The mailing	address (if different):	010		
		019 Document number: F19000004174		
The name an Florida Depa	d street address of the current r rtment of State: (If resigned, er	egistered agent and registered office on file with the nter resigned)		
	Donna Fellows-Coffey			
	2 West Boulevard North			
	Davenport, Florida 33837			
6. The name and (if changed):	d street address of the new regi	stered agent (if changed) and /or registered office		
	Rafael Gornez			
	2 West Boulevard North			
	PO Box NOT acceptable			
	Davenport, Florida 33837			
The street address changed will	ess of its registered office and be identical.	the street address of the business office of its registered agent,		
Such change wa authorized by th	is authorized by resolution du le board, or the corporation ha	ly adopted by its board of directors or by an officer so is been notified in writing of the change.		
Life	Katro	Kyle D. Kottke, Secretary		
Signalia	e of ad-follows or theethe	Printed or typed name and life		
I here by accept I further agree to of my duties, an document is bein corporation has	the appointment as registered o comply with the provisions of I am familiar with and acce ng filed merely to reflect a chi been notified in writing of thi	l agent and agree to act in this capacity, of all statutes relative to the proper and complete performance of the obligation of my position as registered agent. Or, if this ange in the registered office address, I hereby confirm that the is change.		
Topley	General	7/26/22		
Sign	ature of Registered Agent	Date		
If signing on bel	nalf of an entity:			
Kafael	Gome 7			

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