## F21 000004251

(Requestor's Name)			
(Address)			
(,			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
·			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Special metadotone to 1 ming officer.			

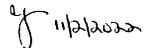
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2022 (\*\*1, 27 | 1/1 | 7: 52



## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: R. E. Garrison Trucking, Inc. Name of Corporation	
· · · · · · · · · · · · · · · · · · ·	
DOCUMENT NUMBER: F21000004251	
The enclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this r	natter to the following:
Carla Pirkle	
Name of Contact Person	
R. E. Garrison Trucking, Inc.	
Firm/Company	
P. O. Box 890	
Address	<del> </del>
Cullman, AL 35056	
City/State and Zip Code	
cpirkle@regarrison.cor	n
E-mail address: (to be used for future annual r	eport notification)
r e a recursión y agricultos	11
For further information concerning this matter, ple	case can:
Carla Pirkle	at (256 )255-1714  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the D	Department of State.
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 cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida State ange is submitted for a corporation organized under the laws of the State of <u>Alab</u> er to change its registered office or registered agent, or both, in the State of Flori	oama
1. The name of	the corporation: R. E. Garrison Trucking, Inc.	
	office address: 1103 County Road 1194, Vinemont, Alabama 35179	
3. The mailing a	address (if different): P.O. Box 890, Cullman, AL 35056	
	poration/qualification: 07-22-2021 Document number: F21000004	251
5. The name and	d street address of the current registered agent and registered office on file with the trument of State: (If resigned, enter resigned)	he
	Karen B. Harwell	
	9721 U.S. Hwy 98	2922
	Dade City, FL 33525	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	îstlett. 27 F. 7:
	Northwest Registered Agent LLC	7: 5
	7901 4th St N STE 300	~>
	P.O. Box. NOT acceptable	
	St. Petersburg FL 33702	
The street address changed will	ress of its registered office and the street address of the business office of its re I be identical.	gistered agent,
Such change was	as authorized by resolution duly adopted by its board of directors or by an offi he board, or the corporation has been notified in writing of the change.	icer so
$W_{c}$	Donovon Lovell, Secretary	
Thomaha anaon	Printed or typed name and title  I the appointment as registered agent and agree to act in this capacity.  To comply with the provisions of all statutes relative to the proper and comple  nd I am familiar with and accept the obligation of my position as registered ag-  ing filed merely to reflect a change in the registered office address. I hereby on  is been notified in writing of this change.	te performance zent. Or, if this onfirm that the
Ton Gl	June 22, 2022	
	gnature of Registered Agent Date	
If signing on be	ehalf of an entity:	
Tom Glove		
1	Typed or Printed Name	

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