642511

(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: 5/1/18 @ Special Instructions to Filing Officer: 5/1/18 @ LOCAL COLOR FORCE LOCAL PROMITE ACTUAL ACTUAL
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Office Use Only



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MAY 0 4 2018

COVER LETTER

Division of Corporations
SUBJECT: Truck Central, Inc.
Name of Corporation
DOCUMENT NUMBER: G42511
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
last Dahinaan
Joel Robinson
Name of Contact Person
Truck Central, Inc.
Firm/Company
2979 West King Street
Address
Cocoa, FL 32926
City/State and Zip Code
sherarobinson@yahoo.com
E-mail address: (to be used for future annual report notification)
Sherarobinson@yahoo.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Shera Robinson,321 \632-9278

Enclosed is a \$35.00 check made payable to the Department of State.

Name of Contact Person

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Area Code & Daytime Telephone Number



April 27, 2018

JOEL ROBINSON 2979 WEST KING STREET COCOA, FL 32926

SUBJECT: TRUCK CENTRAL, INC.

Ref. Number: G42511

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 118A00008742

Claretha Golden Regulatory Specialist II

www.sunbiz.org

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida	_
in order to change its registered office or registered agent, or both, in the State of Florida.	
I. The name of the corporation: Truck Central, Inc.	
2. The principal office address: 2979 West King Street, Cocoa, FL 32926	
3. The mailing address (it different):	
4. Date of incorporation/qualification: 5/31/83 Document number: G42511	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Timothy Pickles, Esq.	
3490 North U.S. Highway 1	
Cocoa, FL 32926	··
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
John L. Soileau, Esq.	
3490 North U.S. Highway 1	
P.O. Hox NOT acceptable Cocoa, FL 32926	
The street address of its registered office and the street address of the business office of its registered age as changed will be identical.	nt,
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
SHERA ROBINSON TRESIDENT Signature by an officer or director SHERA ROBINSON TRESIDENT	- -
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete proper and complete proper and complete proper and the proper and complete proper and the proper and the proper and complete proper and the proper and the proper and the proper as registered proper as registered of the proper address, I be confirm that the corporation has been notified in writing of this change.	
Signature of Registered Agent Y 2015 Date	_
If signing on behalf of an entity:	
Typed or Printed Same * * * FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)