## L07000048250

Billy Kirby Truck Brokers Inc (Requestor's Name)		
105 N Collins are		
(Audiess)		
(Address)  Plant City 335(3-331) (City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
L07-48250 (Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
A. LUNT		
JUN <b>2 5</b> 2008		
EXAMINER		

Office Use Only



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06/05/08--01014--009 \*\*35.00

SECRETARY OF STATES ALLAHASSEE, FLORIDA



June 10, 2008

BILLY KIRBY TRUCK BROKERS INC 105 N. COLLINS AVE. PLANT CITY, FL 33563-3311

SUBJECT: WALLY CHARTERS, L.L.C.

Ref. Number: L07000048250

We have received your document for WALLY CHARTERS, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience

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

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 108A00035632

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Wally Cl (Name of	f Limited Liability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	his matter to the following:
William W. Kirbs	TALLAHASSI
Wally Charters, La (Firm/Company)	T P
105 N. Collins Str. (Address)	S 2
Plant City FL 33. (City/State and Zip Code)	563
For further information concerning this matter	, please call:
(Name of Person)	at ( <u>813</u> ) <u>707-9252</u> (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	amount:
☐ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	me of the limited liability company:	ally Charters, LLC
2. (a)	Principal office address of limited liability compan ( <u>Note: MUST BE STREET ADDRESS</u> )	y: 105 N. Collins Street Plant City FL 33563
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	105 N. Collins Street Plant City FL 33563
	5/7/07	107000048250
3. Da	te of filing/registration in Florida	4. Document number
5. (a)	Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
	Registered Agent:	resigned
	Registered Office Address:	TAIL 3
4.5	D. CNOWD	SS 2
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	
	NEW Registered Agent:	William W. Kirly
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Plant City FL 33563
	(MOST DE LEGRIDA STREET ADDRESS)	Plant CIty FL 33563
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.  (Signature of a member of authorized representative of a member)		
(Signatu		
(Printed	William W. Kirky or typed name of signee)	_
I here comply am fan F.S. C confiri	by accept the appointment as registered agent and a with the provisions of all statutes relative to the prailiar with and accept the obligations of my position or, if this document is being filed to merely reflect a new the limited liability company has been notified.	agree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change.
(Signatu	of Registered Agent)	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		

**FILING FEE: \$25.00** 

INHS18 (05/08)