## 10900026432

Office Use Only



000163844140

01/25/10--01012--009 \*\*\$5.00

10 JAN 25 AM 11: 39

SECRETARY OF STATE

T. HAMPTON

JAN 2 6 2010

EXAMINER

## **COVER LETTER**

_	istration Section sion of Corporations		
SUBJECT:			Go Transport LLC
	Name of	Limite	d Liability Company
Dear Sir or	Madam:		
The enclose	d Registered Agent/Registered	Office	Change and fee(s) are submitted for filing.
Please return	n all correspondence concerning	g this m	atter to the following:
	Gerrit C. Kooi		
	Name of Person		<del></del>
	Consum C Co Tonno and I I	0	
	Crews 2-Go Transport LL Firm/Company	<u>.Ç</u>	
	1 min/Company		
	PO Box 1594		
	Address		
	Fort Lauderdale FI 3330	12	
	City/State and Zip Code		<del></del>
	Crows? Co Boomand no		
E-mail ad	Crews2-Go@comcast.ne dress: (to be used for future annual report	t notification	on)
	·		
For further i	nformation concerning this ma	tter, ple	ase call:
	Gerrit C. Kooi	_ at (	954 ) 682 7816
	Name of Person	ai (_	Area Code & Daytime Telephone Number
	EET/COURIER ADDRESS:		MAILING ADDRESS:
	stration Section		Registration Section
	ion of Corporations		Division of Corporations
	on Building  Executive Center Circle		P.O. Box 6327
	hassee, Florida 32301		Tallahassee, Florida 32314
iana	imosoo, i toriuu 52501		
Encl	osed is a check for the follow	ing amo	ount:
<u> </u>	25 Filing Fee		7 \$55 Filling Fac & Contified Conv
⊅₄	2 I time i.ce		✓ \$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.

Name of the limited liability company:	Crews 2-Go Transport LLC			
2. (a) Principal office address of limited liability compa	any: Crews 2-Go Transport LLC			
(Note: MUST BE STREET ADDRESS)	1712 SW 20 street # S Fort Lauderdale Fl 33315			
(b) Mailing address of limited liability company:	Crews 2-Go Transport LLC			
(Note: MAY BE POST OFFICE BOX)	PO Box 1594 Fort Lauderdale Fl 33302			
March 17 2009	L09000026432			
3. Date of filing/registration in Florida	4. Document number			
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:			
Registered Agent:	Deborah A Ingraham			
Registered Office Address:	1204 NE 16 Terr Fort Lauderdale Fl 33304			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :  NEW Registered Agent: Gerrit C. Kooi				
NEW Registered Office Address:  (MUST BE-FLORIDA STREET ADDRESS)  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 or authorized representative of a member  Gerrit C. Kooi				
Printed or typed name of signee  I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and Vam familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability compositions of Registered Agent	d agree to act in this capacity. I further agree to proper and complete performance of the attempt of the position as registered agent as provided for merely reflect a change in the registered office any has been notified in writing of this change.			
Division of Corporations, P.O. Box FILING FEE:	·			

INHS18 (05/08)