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C. LEWIS

MAR 2 6 2012

EXAMINER

COVER LETTER

TO: Registration Section	•
Division of Corporations	
SUBJECT: J2 Transportation, 1	LLC
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered (Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Kathryn P. Jones, Esq.	
Name of Person	
Pohl & Short, P.A.	
Pirm/Company	
280 W. Canton Ave., Suite 410 Address	
110,555	
Winter Park, Florida 32789	
City/State and Zip Code	*
E-mail address: (to be used for future annual report	notification)
For further information concerning this mat	tter niego cali
Tor rainer information concerning and man	iot, pionio dani
Kathryn P. Jones, Esq.	at (407) 647-7645
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Taliahassee, Florida 32314
Tallahassee, Florida 32301	e mermenes as a récomme de mer e e
Enclosed is a check for the following	ing amount:
xx \$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (5/08)

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. Name of the limited liability company; J2 Trac	nsportation, LLC
2. (a) Principal office address of limited liability of	005 7 7-14 0+ 0-4- 545
(Note: MUST BE STREET ADDRESS)	Orlando, Florida 32801
(b) Mailing address of limited liability company	
(Note: MAY BE POST OFFICE BOX)	Atlanta, Georgia 30306
03/30/2009	1.09000031033 SS 23
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	
Registered Agent:	Gerald L. Connet, Jr.
Registered Office Address:	4961 Park View Dr. St. Cloud, Florida 34771
(b) Enter name of <u>NEW Registered Agent</u> and <u>NEW</u> Registered Agent:	Houston E. Short, Esq.
<u>NEW</u> Registered Office Address: <u>(MUST BE FLORIDA STREET ADDRES</u>	Pohl & Short, P.A. S) 280 W. Canton Ave., Suite 410
	Winter Park ,FL32789
If the limited liability company is not organized unconfirmed that after the change or changes are mad and the business office of the registered agent will liability company, it is hereby confirmed that the chof the members of the limited liability company or or the operating agreement of the limited liability company.	e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization
Signature of a member of authorized representative of a member	
Larry J. White, Manager	
Printed or typed name of signee	
I hereby accept the appointment as registered age comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being file address, I hereby confirm that the limited liability	nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, of my position as registered agent as provided for in the registered office company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Age