L10000071777

(Requestor's Name)			
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(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			





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COVER LETTER

TO: Registration Section Division of Corporations GULF COAST METRO CAB, LLC Name of 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: Clark J. Davis Name of Person GULF COAST METRO CAB, LLC Firm/Company 230 Truck and Trailer Way Address West Palm Beach, Florida 33413 City/State and Zip Code idavis@yellowcabflorida.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Clark J. Davis 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 P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount:

■ \$55 Filing Fee & Certified Copy

■ \$25 Filing Fee

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: GULF COAST METRO	CAB, LLC	
2. (a)	Principal office address of limited liability compan	y: 230 Truck and Trailer Way	
	(Note: MUST BE STREET ADDRESS)	West Palm Beach, Florida 33413	·
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	230 Truck and Trailer Way West Palm Beach, Florida 33413	
07/07/20		L10000071777	
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 l	Dept. of State:
	Registered Agent:	Clark J. Davis	
	Registered Office Address:	1850 SE 17th Street	
	Registered Office Fladiess.	Fort Lauderdale, Florida 33316	‡့ု မ်
			<u> </u>
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office add	
	NEW Registered Agent:	Clark J. Davis	10 3 D
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	230 Truck and Trailer Way	ORDE 3
	MOST BE PLORIDA STREET ADDRESS	West Palm Beach	FL 33413
confir and th liabilit the me the op	limited liability company is not organized under the med that after the change or changes are made, the Fe business office of the registered agent will be identy company, it is hereby confirmed that the change(sembers of the limited liability company or as otherw erating/agreement of the limited liability company.	florida street address of the tical. Or, in the case of a F	registered office
Clark J. [Davis		
	or typed name of signee	_	
compi and I i Chapt addre:	by accept the appointment as registered agent and a with the provisions of all statutes relative to the provisions of all statutes relative to the provisions of my power of the statute of the provision of the p	oper and complete perforn Ssition as registered agent Prely reflect a change in the	nance of my duties, as provided for in e registered office
signatu	re of Registered Agent		

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