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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: METRO MOBILITY MANAGEMENT GROUP, 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

METRO MOBILITY MANAGEMENT GROUP, LLC

Firm/Company

230 Truck and Trailer Way

Address

West Palm Beach, Florida 33413

City/State and Zip Code

jdavis@yellowcabflorida.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Clark J. Davis

_{at (}561

242-6410

Name of Person

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.

I. Na	time of the limited liability company: METRO MOBILITY MA	ANAGEMENT GROUP, LLC	
2. (a)	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	230 Truck and Trailer Way 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	010	L10000071803	
3. Da	ate 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:	Clark J. Davis	
	Registered Office Address:	1850 SE 17th Street	
		Fort Lauderdale, Florida 33316	P G W
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office add	FILE SEP -9 AHASSEE.
	NEW Registered Agent:	Clark J. Davis	アジ 32 〇
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	230 Truck and Trailer Way	ORD 4
		West Palm Beach	,FL 33413
confinand the liabilithe mathematical the or	limited liability company is not organized under the med that after the change or changes are made, the Fine business office of the registered agent will be identity company, it is hereby confirmed that the change(sembers of the limited liability company or as otherworking agreement of the limited liability company.	Florida street address of the tical. Or, in the case of a	ne registered office Florida limited
Signatu	re of a member or authorized representative of a member		
Clark J.			
	I or typed name of signee		
comp and I Chap addre	eby accept the appointment as registered agent and all with the provisions of all statules relative to the property amplifies with and accept the obligations of my potential to the first for the companies of th	agree to act in this capact oper and complete perfor osition as registered agen erely reflect a change in t y has been notified in wr	ity. I further agree to mance of my duties, it as provided for in he registered office iting of this change.
Signat	ure of Registered Agent		

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