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COVER LETTER

TO:

TO: Registration Section Division of Corporations				
A Timely Delivery, 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 r	matter to the following:			
Jay Hamel				
Name of Person				
A Timely Delivery, LLC				
Firm/Company				
1150 West Lake Brantley Road				
Address				
Altamonte Springs, FL 32714				
City/State and Zip Code				
atimelydeliverydispatch@gmail.com				
E-mail address: (to be used for future annua	l report notification)			
For further information concerning this matter, pl	lease call:			
Jay Hamel	321 972-9999 at (
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 a	mount:			
□ \$25 Filing Fee	■ \$55 Filing Fee & Certified Copy			
INHS18 (2/14)				

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

۶.

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: A Timely Deli	very, LLC	
2. (a)		(b)	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1150 West Lake Brantley Road	1	150 West Lake Brantley Road
	Altamonte Springs, FL 32714	A	Itamonte Springs, FI 32714
	07/20/2010	L1	0000076379
3.	Date of filing/registration in Florida	4.	Document number
5 (a)	Gulatilaw, P.L.		
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida De	pt. of State:
	_		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	479 Montgomery Place		
	Altamonte Springs	32714	
			77 GET 3
(b)	JAY HAMEL		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	1 Office addre	•
			22
	NEW Registered Office Address:		
	1150 West Lake Brantley Road		
	Altamonte Springs, FL , FI	32714	
the cha agent v was/w the art Signa I here provis the ob to mer notifie	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the dure of a member a authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provided in writing of this change.	f the register iability composite limite e limited liab	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in polity company. Jay Hame Printed or typed name of signee this canacity I further garge to comply with the

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