# Division of Corporations OOO 52 71G of 6

#### Florida Department of State

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#### LLC REGISTERED AGENT CHANGE JERUE LOGISTICS SOLUTIONS, LLC

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T. Burch NOV.2. 7.2013

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## H130002410143

### 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: JERUE LOGIST	TICS SOLUTIONS, LLC							
2. (a) Principal office address of limited liability company	3200 FLIGHTLINE DR, SUITE 101							
(Note: MUST BE STREET ADDRESS)	LAKELAND, Florida 33811							
(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	3200 FLIGHTLINE DR, SUIT LAKELAND, Florida 33811	3 E 160 C						
12/5/2012  3. Date of filing/registration in Florida	L12000152796 4. Document number	6 F						
-		Ω α						
<ol> <li>(a) Registered Agent and Registered Office shown on Registered Agent;</li> </ol>	MANN, JOHN L							
Registered Office Address:	500 S. FLORIDA AVENUE, STE. 300 LAKELAND, FL 33801							
NEW Registered Agent:  NEW Registered Office Address:  (MUST BE FLORIDA STREET ADDRESS)	C T Corporation System 1200 South Pine Island Road,							
(MUST BE FLORIDA STREET ADDRESS)	Plantation ,FL 33324							
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.  Signanus of a member or publicized representative of a member								
E. Luis Campano	_							
Provided on typed name of signal  I hereby accept the appointment as registered agent and a comply with the provisions of all standes relative to the pr and I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address. I hereby confirm that the limited liability compan		further agree to ce of my duties, provided for in gistered office of this change.						
Mark Williams, AVP C.T. Corporation Syst Signature of Registered Agent	em							
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00								

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