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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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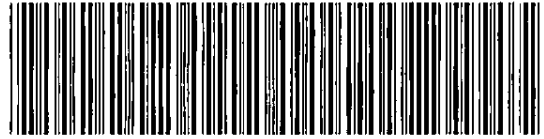
(Business Entity Name)

(Document Number)

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BOARD CERTIFICATIONS:
1. REAL ESTATE 2. TAX LAW
3. CITY, COUNTY & LOCAL GOVERNMENT
4. ELDER LAW

November 14, 2024

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Estate of Michael Sullivan

To Whom It May Concern:

Enclosed is a signed Cover Letter, Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company and a \$55.00 check for the filing fee and certified copy.

If you have any questions, please do not hesitate to contact my office.

Sincerely,

Kevin R. Albaum, BCS

KRA/cea
Enclosures as noted
cc: Joann Sullivan (w/enclosures)

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLOBAL SUPPLY & TRANSPORTATION 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:

Joann M. Sullivan

Name of Person

GLOBAL SUPPLY & TRANSPORTATION LLC

Firm/Company

4509 S Alatomaha St

Address

Saint Augustine, FL 32092

City/State and Zip Code

Pookie 613613 @ Gmail.com and Ryan Sullivan XC @ smcL.com.
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joann M. Sullivan

Name of Person

at (*719*) *493-4069*

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 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. Name of the limited liability company: GLOBAL SUPPLY & TRANSPORTATION LLC

2. (a) 4509 S Alatomaha St, Saint Augustine, FL 32092 (b) 4509 S Alatomaha St, Saint Augustine, FL 32092
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 09/09/2013 4. L13000127285
Date of filing/registration in Florida Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Michael Sullivan

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
4509 S Alatomaha St
Saint Augustine, FL 32092

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Joann M. Sullivan
NEW Registered Office Address:
4509 S Alatomaha St
Saint Augustine, FL 32092

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.

Joann M. Sullivan
Signature of a member or authorized representative of a member

Joann M. Sullivan
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Joann M. Sullivan
Signature of Registered Agent

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

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2024 NOV 19 PM 3:41
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TALLAHASSEE, FL