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FILED 17 SEP 20 PH 12: 35 SECRETARY OF STATE TALLAHASSEE, FLORIDA COVER LETTER

Registration Section TO: **Division of Corporations**

Golden River Transport LLC Name of Limited Liability Company SUBJECT:

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:

Diamis Hinaya Vinent Sanchaz Name of Person

Tient fooden Rivar Transport LLC

47 NW 58 ANC

Miami, Fl 33126

<u>Gold an rivar transport Egnail.</u> Com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dicmis H. Winant at (786) 308-7638 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 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.

Name of the limited liability company: Goldan River Transport LLC 1. 2. (a) 47 Nev 58 Ave (b) <u>P.O. Bo</u> + 8048 Principal office address of limited liability company: Mailing address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX) 1Ami, F/ 33126 SIGA $O \neq |\partial I| \partial 0 15$ Date of filing/registration in Florida L15000122011 3. Document number 5. (a) <u>Diamis Hiraya Sinant Sauchas</u> Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 47HW 58AVC Miami .FL 33126 Naw Registard Office address: Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u>: (b) **NEW** Registered Office Address: 3824 Citroan Dr Sabring FL 33872 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.

Signature of a member or authorized representative of a member

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.

1 a M Signature of Registered Agent

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