## L15000203727

J. HARRIS

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## **COVER LETTER**

TO: Registration Section						
Division of Corporations						
Port Logistics Terminal Opera	ations, LLC					
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office	Change and foo(s) are submitted for filing					
The chelosed Registered Ageno Registered Office	e Change and ree(s) are submitted for fining.					
Please return all correspondence concerning this	matter to the following:					
Richard A. Corbett						
Name of Person						
Port Logistics Terminal Operations, LLC						
Firm/Company	·					
rim/Company						
509 Guisando De Avila-Suite 201						
Address	<del> </del>					
Tampa El 22612						
Tampa FL 33613						
City/State and Zip Code						
mcraig@racfl.com						
E-mail address: (to be used for future annua	l report notification)					
For further information concerning this matter, pl	lease call:					
Richard A. Corbett	813 264-6128					
	at ()					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS:						
Registration Section	Registration Section					
Division of Corporations	Division of Corporations					
Clifton Building	P.O. Box 6327					
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314					
Enclosed is a check for the following an	, mount:					
■ \$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. Na	ame of the limited liability company: Port Logistics	s Termi	nal Opera	tions, LLC		
2. (a)	509 Guisando De Avila-Suite 201	O	<sub>b)</sub> 509 Gui	sando De Avila-Suite 201		
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	Tampa FL 33613	_	Tampa I	FL 33613		
	11/30/2015	_	L1500020	03727		
3.	Date of filing/registration in Florida	<b>-</b> 4.		Document n	number	
5. (a)	Richard G. Hostetter					
J. (u)	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of State	<u>-</u> е:		
	1800 Pembrook Dr #300, Orlando FL 32810	)				
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES.	<u>s)</u>	<del>-</del>		
	1800 Pembrook Dr #300					
	Orlando , FL	32810	)	_	16 SE	
(b)	Richard A. Corbett				JUH 13	
ζ-γ.	Enter name of NEW Registered Agent and/or NEW Registered	Office ac	ldress:	_		
	509 Guisando De Avila-Suite 201, Tampa FL 33613				JUH 13 PH 12: 49 LAHASSFE FLORID	
	NEW Registered Office Address:				80 <b>(</b> 9	
	509 Guisando De Avila-Suite 201			-	I.S.	
	Tampa FI.	33613		_		
the cha agent v was/we the arti	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lie ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the number of a member or authorized representative of a member by accept the appointment as registered agent and agreement of the	the reginability confirmation of the limited Rice	stered office ompany, it is nited liability liability con chard A. C	e and the busis hereby configured or nearly.  Frinted or type acity. I furth	siness office of the registere afirmed that the change(s) or as otherwise provided in seed name of signee	
provisi the obl to mer notified	ions of all statutes relative to the proper and complete ligations of my position as regimered agent as provide ely reflect a change in the registered office address. I d in writing of this change.	perform d for in hereby o	nance of my of Chapter 605 confirm that	duties, and I 5, F.S. Or, if the limited li	am familiar with and accep this document is being filed iability company has been	
Signatu	re of Registered Agent					