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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Katie Boese katie.thomas@cscglobal.com

Date: September 4, 2019

Order#: 892175/074

Re: MAPLE LEAF LOGISTICS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX __ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Katie THOMAS c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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: MAPLE LEAF LOGISTICS, LLC

| 2. (a) | 6751 FORUM DRIVE SUITE 200 | (b) | 6/51 FC | DRUM DRIVE SUIT | E 200 |
|---|---|---|--|---|--|
| , | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | | lailing address of limite (Note: MAY BE POS | |
| | ORLANDO, FL 32821 | _ | ORLAND | O, FL 32821 | |
| | 10/26/2016 | - - | L16000197 | 7921 | |
| 3. | Date of filing/registration in Florida | 4. |] | Document number | |
| 5. (a) | BUSINESS FILINGS INCORPORATED | | | | |
| , , | Registered Agent and Registered Office shown on the records of t | he Florida | Dept, of State: | | |
| | 1200 SOUTH PINE ISLAND | | | | - · · · · · · · · · · · · · · · · · · · |
| | Registered Office Address (MUST BE FLORIDA STREET A | DDRESS) | | | |
| | | | | | # 2 88 21 |
| | PLANTATION FL | 33324 | | | 7 17 |
| (b) | Corporation Service Company | | | | |
| | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> | Office add | ress: | | ₹ ± |
| | | | | | , - |
| | 1201 Hays Street | | | | |
| | NEW Registered Office Address: | | | | |
| | | _ | | | |
| | Tallahassee, FL_ | 32301 | | | |
| the cha agent w was/we | imited liability company is not organized under the lawinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the less of organization or the operating agreement of the | the regist bility cor Tthe limi | ered office npany, it is ted liability | and the business of hereby confirmed to company or as other | fice of the registered hat the change(s) |
| | /s/ Marc G. Baumann | Marc | G. Baumar | ın, Manager | |
| Signat | ure of a member or authorized representative of a member | | | Printed or typed name of | of signee |
| provisio the obli to mere notified | by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigutions of my position as registered agent as provided ly reflect a change in the registered office address. I have the change. | ee to act i performa for in Ci ereby coi | n this capac nce of my di hapter 605, nfirm that th | city. I further agre uties, and I am fam F.S. Or, if this doc ae limited liability o | e to comply with the iliar with and accept cument is being filed company has been |
| Signatur | re of Registered Agent Corporation Service Company | BY: Gr | ace E. Kirb | y, Asst. Vice Pre | sident |
| | - | | | | |