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COVER LETTER

Division of Corporations	·
N. Matias Transport, LLC.	
	f 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 m	natter to the following:
Noel Matias	
Name of Person	
N. Matias Transport LLC	
Firm/Company	
1817 Laredo Dr	
Address	
Deltona, FL 32738	
City/State and Zip Code	
n.matiastransportllc@yahoo.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, ple	ase call:
Noel Matias	386 837 1955
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 am	ount:
25 Filing Fee	S55 Filing Fee & Certified Copy
INHS18 (2/14)	

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. N	ame of the limited liability company: N. Matias Tra	ansport,	LLC	
2. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1817 Laredo Dr		1817 La	redo dr
	Deltona, FL 32738		Deltona,	FL 32738
	Dec 2016		L16	000224160
3.	Date of filing/registration in Florida	4.		Document number
5. (a	UNITED STATES CORPORATION AGENT	S, INC.		
	Registered Agent and Registered Office shown on the records of UNITED STATES CORPORATION AGENT		Dept. of State	- e:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	2	- ******
	13302 WINDING OAK COURT			7 7
	tampa , FI	33612		DEC T
(b)	noel matias			
(0)	Enter name of NEW Registered Agent and/or NEW Registered	l Office ad	dress:	
	noel matias			9.5 7
	NEW Registered Office Address:			•
	1817 Laredo dr			
	deltona	32738		
the ch agent was/w	limited liability company is not organized under the latange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited literature authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the registability constants of the limited l	stered office impany, it is sited liability	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in
Signa	ature of a member or authorized representative of a member			Printed or typed name of signee
the ob to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this change.	ree to act perform d for in C hereby co	in this cape ance of my a Chapter 605 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been