170000063730

(Requestor's Name)					
(Address)					
. (Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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APR 0 6 2017

Y SULKER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: April 3, 2017

Order#: 559680/030

Re: YOUR LOCATION LUBRICATION TRUCK 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:Ami Casper c/o Corporation Service Company 2711 Centerville Road, Suite 400 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. N	ame of the limited liability company: YOUR LOCATION	ON LUBI	RICATION	TRUCK LLC	
2. (a)	330 E. Oak Ridge Road Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Orlando, FL 32809				
	03/20/2017		L1700006	63730	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Zachary Zeller				
(b)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	330 E. Oak Ridge Road				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-	
				-	
	Orlando , FL	32809	 	_	
	Enter name of NEW Registered Agent and/or NEW Registered	Office add	<u>iress</u> :		
				17 APR -5	
	1201 Hays Street			$ \mathcal{S}_{n}$	
	NEW Registered Office Address:				
	Tallahassee , FL	32301			
the cha agent v was/w	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 lia ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the	the regisability co	tered office mpany, it is ited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in	
	- Xel E. Whee	Jill C	Cilmi, Autho	rized Person	
I here provisi the obi to mer notifie	ture of a member or authorized representative of a member by accept the appointment as registered agent and agri- ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	performa d for in C nereby co	ance of my Chapter 605 Onfirm that	duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been	
Digitatu	are of Registered Agent Corporation Service Company	DI.A	iii ivi. Cas	per, Asst. Vice President	