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PICK-UP WAIT MAIL		
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TO: **Registration Section Division of Corporations** 

Jer The Hill Transportation LLC Name of Limited Liability Company SUBJECT:

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Leval Diew Name of Person Over The Hill Transportation LLC Firm/Company 2108 NE 39 lerr Address HOMESTEAD, FL 33033 City/State and Zip Code <u>E-mail address:</u> (to be used for future annual report notification)

For further information concerning this matter, please call:

Karen Hill ar (305, 978-2203 Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

**Registration Section Division of Corporations Clifton Building** 2661 Executive Center Circle Tallahassee, Florida 32301

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## MAILING ADDRESS:

**Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

S25 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. Name of the limited liability company: <u>OVERTY</u> 2. (a) <u>ZIOR NE 39 Lerr</u> Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) HOMESTEED, FL 33033	(b)	11 70 1011
<ul> <li>3. Date of filing/registration in Florida</li> <li>5. (a) <u>Kacen Hill</u> Registered Agent and Registered Office shown on the records of</li> </ul>	4.	Document number
Registered Office Address (MUST BE FLORIDA STREET 2108 NE 39 Le (1 HOWESTERD	<u>ADDRESS)</u> 13302	 3
(b) Levar K. Diew Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	<u>-</u>	
2108 NE 39 Ferr <u>NEW</u> Registered Office Address: Home Stead		STATE STATE SI S?
Homestead, F If the limited liability company is not organized under the la the change or changes are made, the Florida street address o agent will be identical. Or, in the case of a Florida limited I was/were authorized by an affirmative vote of the members	f the register iability comp	te of Florida, it is hereby confirmed that after ed office and the business office of the registered bany, it is hereby confirmed that the change(s)

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.

Signature of Registered Agent

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