117000166223

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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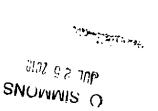
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IB JUN 20 PH 6: N SECRETARY OF STATE ALLAHASSEE, FLORIDA



COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Aleko Trucking, LC Name of 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 matter to the following:		
Alexander Esitashuili Name of Person		
Aleko Trucking, LLC Firm/Company		
109 Palm Circle Address		
Atlantis FL 3.3462 City/State and Zip Code		
Alexanderesita a gmail com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Alexander Esitabuili at (561) 516 97 30 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 amount:		
S25 Filing Fee \$\sqrt{555}\$ Filing Fee & Certified Copy INHS18 (2/14) \(\sqrt{75} \mathred{\text{M}} \tag{75} \)		
INHS18 (2/14) Qryor M.		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pùrsuant 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

7 107 100.	
1. Name of the limited liability company: Aleko Tr	ncking LLC
2. (a) 109 Palm Circle,	(b) 109 Palm Circle
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
00	Λ i · · · · · · · · · · · · · · · · · ·
Atlantis FL. 33462	4 Flantis FL 33462
	-
08/04/2017	L 17000166223
3. Date of filing/registration in Florida	4. Document number
5. (a) Corporation Service	Company
Registered Agent and Registered Office shown on the records of th	
Inni Llaus Street	
Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS) = 5 \(\otimes
Talladacas	JUN 20 PM 6: 10 CRETARY OF STATE LANASSEE, FLORIDA Office address:
OVIGHASSEE , FL	32301 SE SE
Taxala Mazaidze	고 교 · · · · · · · · · · · · · · · · · ·
(b) SIMP WOLG I OLV Enter name of NEW Registered Agent and/or NEW Registered C	Office address:
NEW Registered Office Address:	
109 Palm Circle,	
Atlantis .FL	33462
UCIANITZ FL	
If the limited liability company is not organized under the laws	s of the State of Florida, it is hereby confirmed that after
the change or changes are made, the Florida street address of t agent will be identical. Or, in the case of a Florida limited liab	bility company, it is hereby confirmed that the change(s)
was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the l	the limited liability company or as otherwise provided in
the articles of organization of the operating agreement of the r	mines mading company.

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.

Alexander [=sitashiri]
Printed or typed name of signee

Signature of Registered Agent

Signature of a member or authorized representative of a member