## 117000196889

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(Address)				
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## **COVER LETTER**

то:	Registration Section Division of Corporations				
SUBJ	Mccorvey's Transport, LLC.				
SUBJECT: Name of Limited Liability Company					
Dear	Sir or Madam:				
The e	nclosed Registered Agent/Registered Of	Tice Change and fee(s) are submitted for filing.			
Please	e return all correspondence concerning th	his matter to the following:			
Mart	azz Mccorvey				
	Name of Person				
Мсс	orvey's Transport, LLC.				
	Firm/Company	<del></del>	18		
215	Garfield Drive		18 806 27		
	Δ Adengg		SSEC.		
Pens	sacola, Florida 32505		AH 8: 92 CY OF STATE SEE, FLORID		
	City/State and Zin Code		92 DRID		
Mcc	orvey.martazz83@gmail.com		7.		
	E-mail address: (to be used for future an	nual report notification)			
For fi	urther information concerning this matter	r, please call:			
Mart	azz Mccorvey	850 485-0108			
	Name of Person	Area Code & Daytime Telepho	one 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	g amount:			
	<b>☑</b> \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR \* PMITED 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

Mccorvey's Transport, LLC.	(	<sub>b)</sub> Mcco	rvey's Transport, LLC.
Principal office address of limited lia (Note: MUST BE STREET A	bility company:		Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)
215 Garfield Drive		215 G	Sarfield Drive
Pensacola, Florida 32505		Pensa	acola, Florida 32505
September 22, 2017		L1700	0196889
Date of filing/registration in	Florida 4.		Document number
Cheyenne Moseley			
Registered Agent and Registered Office show	vn on the records of the Florid	ia Dept. of :	State:
United States Corporation Age	ents, Inc.		<b>8</b>
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			— (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
13302 Winding Oak Court A			Me 27
Tampa	, FL_33612	?	ma 👺 🕕
Martazz Mccorvey			FLORIUA
Enter name of NEW Registered Agent and/o	or NEW Registered Office a	ddress:	
NEW Registered Office Address:			_ <del>_</del>
215 Garfield Drive			
······································		5	

the articles of organization or the operating agreement of the limited liability company.

Signature of Alternber or authorized representative of a member	Martazz Mccorvey
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 Jamiliar 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.

Markon Muchuley
Signature of Registered Agent