## 18000 159 122

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## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: LET'S GO ALREADY LOGISTICS, LLC  Name of Limited Liability Company						
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Michael LaSala						
Name of Person						
IncSmart.biz, Inc.						
Firm/Company						
3609 Hammerkop Dr.						
Address						
North Las Vegas, NV 89084						
City/State and Zip Code						
admin@incsmart.biz						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Michael LaSala at (702 ) 334-0391						
Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: MAILING ADDRESS:						
Registration Section Registration Section						
Division of Corporations  Clifton Building  Division of Corporations  P.O. Box 6327						
2661 Executive Center Circle Tallahassee, Florida 32314						
Tallahassee, Florida 32301						
Enclosed is a check for the following amount:						
\$25 Filing Fee \$\square\$ \$55 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.

l. Na	ame of the limited liability company: LET'S G	O ALR	EADY L	OGISTICS, LLC	
2. (a)			(b)	i	
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u> </u>	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	3712 JULIUS ESTATES BLVD.		3712 J	ULIUS ESTATES BLVD.	
	WINTER HAVEN, FL 33881		WINTER	R HAVEN, FL 33881	
	06/29/2018		L18000	159122	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	UNITED STATES CORPORATION AGEN	NTS, INC	<b>.</b>	I	
J. (a)	Registered Agent and Registered Office shown on the records 13302 WINDING OAK COURT			-   e: .	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRES	<u>:S)</u>	-	
	TAMPA	<sub>FL</sub> 33612	2	- ~a	
(b)	Registered Agents Inc.  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			FIL AHASSI	
	7901 4th St N				
	NEW Registered Office Address:	· <del>-</del> • · · · · · · · · · · · · · · · · · · ·			
	STE 300				
	St. Petersburg	<sub>FL</sub> 3370	2		
agent w was/we the artic	mited liability company is not organized under the large or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the members eles of organization or the operating agreement of the members of the large and large and large and large agreement of the large and large agreement of the large agreement of th	of the reginate of the line of the limited	istered office ompany, it is nited liability	and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in opany.	
	ure of a member or authorized representative of a member			Printed or typed name of signee	
the obli to mere	y accept the appointment as registered agent and a ons of all statutes relative to the proper and comple gations of my position as registered agent as provid ly reflect a change in the registered office address, in writing of this change.	gree to ac te perforn ded for in I hereby c	t in this cape nance of my e Chapter 605 confirm that i	icity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been	

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

- Assistant Secreta [4]

Bill Havre

Signature of Registered Agent