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AUG 2 9 2019 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Army of the land Logistics (L) 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:
Lashunda Winding Name of Person Army of the Lord Logistics CLC
Firm/Company
9526-B2 Argyle Forest Blud. Address) 4 Forest Blud.
)(ACK SON VILLE FL 3222 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
La Shunda Winding at (225) 244-3006 Name of Person at (225) 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:
☑ \$25 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.

1. N	ame of the limited liability company: Army of the Lord Cogistics LCC
2. (a)	000 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Principal office address of limited liability company: Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
	Ste #507 Ste #507
	Jacksonville, FC 32222 Jacksonville, FC 3222
	7/24/2018 (15000177267
3.	Date of filing/registration in Florida 4. Document number
5. (a)	
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	4140 Plantation Onts Blud.
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	1)nit 1212
	Orange Park , FL 320105
(b)	(a'Shunda Winding
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	95210-B2 Arayla Forest Blud
	NEW Registered Office Address:
	54e # 507
	Jacksonville FL 32222
the cha agent was/w the art	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after ange or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.
	ture of a member or authorized representative of a member Printed or typed name of signee
provis the ob- to mer	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed ely reflect a change in the registered office address. I hereby confirm that the limited liability company has been d in writing of this change.
Signatu	re of Registered Agent

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