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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	Y G USA TRUCKING LLC					
3000	Name of Limited Liability Company					
Dear S	Sir or Madam:					
The en	closed Registered Agent/Registered Office (Change and fee(s) are submitted for filing.				
Please	return all correspondence concerning this m	atter to the following:				
YASIE	EL GONZALEZ					
•	Name of Person					
Y G US	SA TRUCKING LLC					
	Firm/Company					
4885 29	9TH STREET SW					
	Address					
LEHIG	SH ACRES, FL 33973					
-	City/State and Zip Code	 				
E	E-mail address: (to be used for future annual	report notification)				
For fur	rther information concerning this matter, plea	ase call:				
YADIE	EL GONZALEZ Name of Person	at (239) 299 · 6286 Area Code & Daytime Telephone Number				
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following am	ount:				
	■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy				
INHSI	8 (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:	KING LL	C			
2. (a)	4885 29TH STREET SW, LEHIGH ACRES, FL 33973	(b	4885 29TI	H STREET SW,	LEHIGH ACRES, FL 33973	
2 . (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
3.	10/30/2018 Date of filing/registration in Florida		L180002543	381 Document nur	mber	
	VASIFI GONZALEZ	**		Doument na		
5. (a)	Registered Agent and Registered Office shown on the records of 4885 29TH STREET SW, LEHIGH ACRES, FL 33973	_ de: _				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
(b)	4885 29TH STREET SW, LEHIGH ACRES , F	L		_ _	2022 HAR - SECRETAL	
	YADIEL GONZALEZ					
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_	SEE S	
	4885 29TH STREET SW, LEHIGH ACRES, FL 33973			_	AM 7: 46 SSEEL FL	
	NEW Registered Office Address:					
	4885 29TH STREET SW, LEHIGH ACRES	L		_		
chang agent was/w	fimited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members licles of organization or the operating agreement of the	e registere iability co of the lime c limited l	ed office an impany, it is ited liabilit	d the business of the business	office of the registered med that the change(s)	
Sign	ature of a member or authorized representative of a member			Printed or typed	name of signee	
provis the ob to me	cby accept the appointment as registered agent and age ions of all statutes relative to the proper and complete digations of my position as registered agent as provide elv reflect a change in the registered office address, I ed in writing of this change.	ree to act e performe ed for in C hereby co	in this cape ince of my c hapter 605 infirm that	acitv. I further duties, and I an 5, F.S. Or, if th the limited liah	agree to comply with the n familiar with and accept is document is being filed ility company has been	
Signat	ure of Registered Agent					