## L1900005489

(Requestor's Name)			
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(Business Entity Name)			
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D SCOTT MAY 16 2019

	COVER LETTER , .		
<b>ΓO:</b> Registration Section Division of Corporations			
SUBJECT:			
	me of Limited Liability Company	<del></del>	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Off	ffice Change and fee(s) are submitted for filing.		
Please return all correspondence concerning th	his matter to the following:		
Toni Brady		27.	
Name of Person		2019 HAY	
TNT CUSA, LLC			
Firm/Company			
5753 Hwy. 85 North, #3242			
Address		-	
Crestview, FL 32536			
City/State and Zip Code			
mbrady2114@gmail.com			
E-mail address: (to be used for future ann	nual report notification)		
For further information concerning this matter,	r, please call:		
Toni Brady	217 741-9058		
Name of Person	Area Code & Daytime Telephor	ne 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:		
\$25 Filing Fee	□ \$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	me of the limited liability company: TNT CUSA, LI	LC
2. (a)	5753 Hwy. 85 North, #3242	(b) 5753 Hwy. 85 North, #3242
(u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	Crestview, FL 32536	Crestview, FL 32536
	January 3, 2019	L19000005489
š.	Date of filing/registration in Florida	4. Document number
5. (a)	Cheyenne Moseley, US Corp. Agents	
7. (a)	Registered Agent and Registered Office shown on the records of the	he Florida Dept. of State:
	13302 Winding Oak Court A	
	Registered Office Address (MUST BE FLORIDA STREET A	MOKESS)
		: · · · · · · · · · · · · · · · · · · ·
	Tampa	33612
	, I L	
(b)	Toni Brady	
	Enter name of NEW Registered Agent and/or NEW Registered (	Office address:
	5753 Hwy. 85 North, #3242	
	NEW Registered Office Address:	
	MEN RESILECT OTHER Address.	
	Crestview	32536
he chai gent w vas/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of fill be identical. Or, in the case of a Florida limited lia	es of the State of Florida, it is hereby confirmed that after the registered office and the business office of the registered bility company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in limited liability company.  Toni Brady
Signan	ure of a member or authorized epresentative of a member	Printed or typed name of signee
provision he oblicon mere cotified	oy accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I have been address, I have been address of this change.	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am fumiliar with and accept for in Chapter 605, F.S. Or, if this document is being filed ereby confirm that the limited liability company has been

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