1190000 59204

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



500338947545

01/17/20--010(S--006 ≉€25.00

20 JAN 17 AM 7: 07
DEPARTMENT OF STATE ALL AHASSEE FLORIDA
ALL AHASSEE FLORIDA
S. YOUNG
S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporation	ons						
Ponte Vedra T	Ponte Vedra Transport LLC						
	Name of Limited Liability Company						
Dear Sir or Madam:							
The enclosed Registered Agen	nt/Registered Office Change and fee(s) are submitted for filing.						
Please return all correspondence	ce concerning this matter to the following:						
Bryan Matias							
Name	of Person						
Ponte Vedra Transport LI	LC						
Firm/C	Company						
340 Old Bluff Dr							
Add	Iress						
Ponte Vedra, FL 32081							
City/State	e and Zip Code						
pontevedratransport@gm	nail.com						
E-mail address: (to be use	sed for future annual report notification)						
For further information concer	rning this matter, please call:						
Bryan Matias	904 588-8980						
Name of Perso	on Area Code & Daytime Telephone i	Number					
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, Florida 33	Registration Section Division of Corporations P.O. Box 6327 r Circle Tallahassee, Florida 32314	Registration Section Division of Corporations P.O. Box 6327					
Enclosed is a check for the following 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.

1. N	ame of the limited liability company: Ponte Vedra	Transp	ort LLC			
2. (a)	182 Garden Wood Dr	a	(b) 182 Garden Wood Dr			
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(`	Mail	ing address of limited liability of the MAY BE POST OFFI		•
	Ponte Vedra, FL 32081		Ponte Vedr	a, FL 32081		
	12/23/2019	_	L190000592	204		-
3.5. (a)	Date of filing/registration in Florida Jose Matias	4,	Do	cument number		
J. (u)	Registered Agent and Registered Office shown on the records of 182 Garden Wood Dr	the Florida	Dept. of State:			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			TANA ISIAN RETS	ر 2020	71
	Ponte Vedra FL	32081		ARTHEN ON OF C AHASS	2020 JAN 17	
(b)	Bryan Matias			TORPOR OR POR	3	M
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	CERSIAN CORRESPONDED	AM 7: 08	U
	340 Old Bluff Dr			무렇다	80	
	NEW Registered Office Address:					
	Ponte Vedra FL	32081	· -			
the chagent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of the organization or the operating agreement of the	the regiability confithe lin	stered office an ompany, it is he lited liability co	d the business office of reby confirmed that the impany or as otherwise	the reg	gistered c(s)
	Sya llet		BRYAN	MATIAS nted or typed name of signe		
I here provis the ob to mer notifie	ature of a member or authorized representative of a member why accept the appointment as registered agent and aggions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I and in writing of this change.	ree to acc perform d for in (hereby c	t in this canacit	v. I further naree to co	mnlv w	ith the laccept sy filed been