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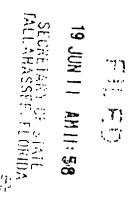
(Requestor's Name)							
(Address)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

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JUN 2 4 2019 T SCHROEDER

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	What the Truck Transport, L	LC					
20.50	Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Offi	ce Change and fe	ee(s) are submitted for filing.				
Please	return all correspondence concerning thi	s matter to the fo	ollowing:				
Trista	n D. Rivers						
	Name of Person		-				
Fruitic	on Enterprise, LLC						
	Firm/Company	de					
1800	Williams Manor Ave.						
	Address		-				
Orlan	do, FL 32811						
	City/State and Zip Code		-				
thefru	iitionenterprise@gmail.com						
H.	-mail address: (to be used for future ann	ual report notific	ation)				
For fur	ther information concerning this matter,	please call:					
Trista	n Rivers	951	235-3736				
	Name of Person		Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divi P .O.	stration Section sion of Corporations Box 6327 shassee, Florida 32314				
	Enclosed is a check for the following	closed is a check for the following amount:					
	□ \$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

(a)	1800 Williams Manor Ave.	(b	1800	Williams Manor Ave.
/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Orlando, FL 32811		Orland	do, FL 32811
	05/16/2019			0132874
	Date of filing/registration in Florida	- 4.	•	Document number
(0)	Fruition Enterprise, LLC			
(a)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of S	State:
	1800 Williams Manor Ave.			್ರೌ್ಮ
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	2	TIP JUN
	Orlando, FI , FI	32811		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	dress:	
	Tristan Rivers			Mark 1
	NEW Registered Office Address:			
	1800 Williams Manor Ave.			
	Orlando, FL, FI	32811		
cha ent v s/we	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited libere authorized by an affirmative vote of the members of elegion organization or the operating agreement of the	f the regi ability co of the lin	stered of ompany, sited liab	fice and the business office of the regis it is hereby confirmed that the change(s ility company or as otherwise provided

provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in vyriting of this change.

Signature of Registered Agent