## K19000291238

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(Address)						
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## **COVER LETTER**

TO: Registration Section

INHS18 (2/14)

Divi	sion of Corporations					
SUBJECT:	2 FRIENDS AND A TRUCK LLC					
	Name of Limited Liability Company					
Dear Sir or ?	Madam:					
The enclosed	d Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.			
Please return	all correspondence concerning	g this matter to the	following:			
Melissa Jo	nes					
	Name of Person		<del></del>			
ZenBusiness	Inc.					
<del></del>	Firm/Company		<del></del>			
336 E. Colleg	ge Ave. Suite 301					
	Address		<del></del>			
Tallahassee, l	FL 32301					
	City/State and Zip Coo	le	<del></del>			
ra@zenbusin	ess.com					
E-mail	address: (to be used for future	annual report noti	rication)			
For further is	nformation concerning this ma	tter, please call:				
Melissa J	Jones	844 at (	493-6249			
	Name of Person		Area Code & Daytime Telephone Number			
Reg Div P.O	iling Address: cistration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee. FL 32303			
Enc	losed is a check for the follow	ing amount:				
<b>□</b> \$	25 Filing Fee	<b>□</b> \$	55 Filing Fee & Certified Copy			

## 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	Jame of the limited liability company: 2 FRIEN	OS A	ND A TE	RUCK LLC			
2. (a)	9716 N 56 St		<sub>(b)</sub> 8716 N 56 St.				
Z. (a,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		` ,	(Note: MAY BE POST OFFICE BOX)			
	P.O. Box 290345		P.O. B	ox 290345			
	Temple Terrace, FL 33687		Templ	e Terrace, FL 33687			
	11/25/2019		L19000	291238			
<ol> <li>(a</li> </ol>	Date of filing/registration in Florida  Registered Agents Inc.	4.	Ī	Document number			
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  7901 4th St N							
	Registered Office Address	4DDRE.	<b>22</b> )				
	St. Petersburg , FI	33702					
<b>(</b> b)	ZenBusiness Inc  Enter name of NEW Registered Agent and/or NEW Registered	l Office a	address:				
	336 E. College Ave.						
	NEW Registered Office Address:						
	Suite 301						
	Tallahassee , FI	32301					
chang agent was/v the ar	limited liability company is not organized under the large 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 of ticles of organization or the operating agreement of the Mohamed M. Tawerghi	registe ability of the li limited	red office and company, it is mited liability l liability comp lohamed N	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.  A. Tawerghi			
_	ature of a member or authorized representative of a member			Printed or typed name of signee			
provi the o to me notifi	eby accept the appointment as registered agent and agsions of all statites relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I edlin writing of this change.	nantan	manco of mu d	utace and Law tamibar unth and accord			
21Sura	ture of Registered Ageht						