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	To:	Division of Co	202 SEI				
		Fax Number	: (850)617-6383	2021 FEB 1 SEGRETAN			
1:41		Account Number Phone Fax Number	: REGISTERED AGENTS INC. : 120090000081 : (307)200-2803 : (855)330-1010	ASSEE.			
	*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**						
1021 FEB 11 PH 1:	'Email A	ddress:					

LLC REGISTERED AGENT CHANGE EXPEDITED LOGISTICS LLC

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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.

Florida						
1. Na	nme of the limited liability company: EXPEDI	<u>TED</u>	LOGIS	TICS LLC		
2. (a)	333 SOUTHERN BLVD	((b) 333 SOUTHERN BLVD			
() <u>-</u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		, <u> </u>	Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	200		200_			
	WEST PALM BEACH, FL. 33405		WEST PALM BEACH, FL. 33405			
	01/23/2020		L200000)29242		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	LAUREN SANTA					
J. (u)	Registered Agent and Registered Office shown on the records of	- 2:				
	333 SOUTHERN BLVD			_		
	Registered Office Address (MUST BE FLORIDA STREET	<u>SS)</u>	202 SE:			
	200					
	WEST PALM BEACH F	_L 3340	SECRETAR TALLARIA			
(b)	Registered Agents Inc.	So [™]				
,-,	Enter name of NEW Registered Agent and/or NEW Registere	d Office	nddress:	PM 4: 48 OF STATE SEE, FL		
	7901 4th St N	E 69				
	NEW Registered Office Address:					
	STE 300			-		
	St. Petersburg	337()2	_		
the ch agent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited la were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the re liability of the l	gistered office company, it i imited liabilit	e and the business office of the registere is hereby confirmed that the change(s) by company or as otherwise provided in		
<u>R_:</u>	lug tark	R	iley Park			
	ature of a member or authorized representative of a member			Printed or typed name of signee		
I here provis	eby accept the appointment as registered agent and agions of all statutes relative to the proper and complet	gree to c e perfoi	ict in this cap mance of my	acity. I further agree to comply with the duties, and I am familiar with and accep		

Thereby accept the appointment as registered agent 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 spriting of this change.

Bill Havre - Assistant Secretary

Signature of Registered Agent