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(((H200001769393)))



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To:

**Division of Corporations** 

Fax Number : (850)617-6383

From:

Account Name: REGISTERED AGENTS INC.

Account Number: 120090000081 Phone : (307)200-2803

Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC REGISTERED AGENT CHANGE CTC LOGISTICS,LLC

Certificate of Status 0 Certified Copy 0 Page Count 02 Estimated Charge \$25.00

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June 12, 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CTC LOGISTICS, LLC 1742 S WOODLAND BLVD 146 DELAND, FL 32720US

SUBJECT: CTC LOGISTICS, LLC

REF: L20000149255

We have received your document for CTC LOGISTICS, LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

According to our records the registered agent listed is already showing on our records.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons FAX Aud. #: H20000176939

Regulatory Specialist II Supervisor Letter Number: 120A00011668

## 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. Name of the limited liability company: CTC LOGISTICS,LLC |   |   |   |   |                            |
|---|---|---|---|---|----------------------------|
| 2. (a)  | 1742 S WOODLAND BLVD  | (b)   | 1742 S                                    | WOODLAND BLVD   |                            |
| 2. (4)  | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)   | _ (0)   |   | Mailing address of limited liabili (Note: MAY BE POST OFF)                                |                            |
|   | 146   |   | 146                                       |   |                            |
|   | DELAND, FL 32720  | _   | DELAN                                     | D, FL 32720   |                            |
|   | 06/01/2020  | 1   | _20000                                    | 149255  |                            |
| 3.  | Date of filing/registration in Florida  | 4.  |   | Document number   |                            |
| 5. (a)  | REGISTERED AGENTS INC   |   |   |   |                            |
| J. (4)  | Registered Agent and Registered Office shown on the records of th   | e Florida                                       | Dept. of Star                             | <del>-</del><br>te:   |                            |
|   | 7901 4TH ST N   |   |   |   |                            |
|   | Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  |   |   | _   | اري<br>1403<br>نسب         |
|   | 4000  |   |   |   |                            |
|   | ST. PETERSBURG FL C   | 33702   |   | -   | 2523 JUH 1 1               |
|   |   |   | •   | -   | E                          |
| (b)   | Registered Agents Inc.  |   | <del></del>                               | _   | æ                          |
|   | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>  | Office add                                      | ress:                                     |   | ယ်<br>ယ                    |
|   | 7901 4th St N   |   |   |   | 0-                         |
|   | NEW Registered Office Address:  |   | _   | _   |                            |
|   | STE 300   |   |   |   |                            |
|   |   |   |   | _   |                            |
|   | St. Petersburg  | 33702   |   | _   |                            |
| the cha<br>agent w<br>was/we                                | imited liability company is not organized under the lawsinge or changes are made, the Florida street address of tivill be identical. Or, in the case of a Florida limited liability authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li                             | he regist<br>pility cor<br>the limi<br>mited li | ered offic<br>npany, it i<br>ted liabilit | e and the business office of<br>s hereby confirmed that the<br>sy company or as otherwise | f the registered change(s) |
| Signat  | ure of a member or authorized representative of a member  |   |   | Printed or typed name of signed   | <u>.</u>                   |
| the oblito mere   | by accept the appointment as registered agent and agre-<br>ons of all statutes relative to the proper and complete p<br>igations of my position as registered agent as provided<br>by reflect a change in the registered office address, I he<br>I myriting of this change.  Bill Havre - Assistant<br>re of Registered Agent | erforma<br>for in Ci<br>reby coi                | nce of my<br>hapter 60:<br>nfirm that     | duties, and I am familiar w   | ith and accent             |