h20000147467

(Re	equestor's Name)	-
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400368930024

7121 JUT 28 AH II: 53

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	YSE FREIGHT LLC					
Name of Limited Liability Company						
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered C	Office Change a	nd fee(s) are submitted for filing.			
Please	return all correspondence concerning	this matter to t	he following:			
TARA	CARRASCO					
	Name of Person					
ELITE	ULTIMATE BUSINESS SOLUTIONS					
	Firm/Company					
6421 N	FLORIDA AVENUE					
	Address					
TAMP	A, FL 33604					
	City/State and Zip Code					
YSEFR	EIGHT@GMAIL.COM					
E	-mail address: (to be used for future a	nnual report no	tification)			
For fur	ther information concerning this matte	er, please call;				
TARA	CARRASCO	813	753-0795			
	Name of Person	at (Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following	ig amount:				
	\$25 Filing Fee		\$55 Filing Fee & Certified Copy			
INHS18	? 3 (2/14)					

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)	(b)					
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)		
	7231 W CAUSEWAY BLVD		7231 W CAUSEW			
	TAMPA, FL 33619		TAMPA, FL 3361	9		
	06/17/2020		L20000167467			
	Date of filing/registration in Florida	4.	Docum	nent number		
(a)	ANTUAN R LEWIS					
	Registered Agent and Registered Office shown on the record	ds of the Flori	da Dept. of State:	. 2 29 21		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	2229 RICHWOOD PIKE DRIVE			80		
	RUSKIN	. FL 33570		<u>₹</u>		
(b)	ANTUAN					
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ddress:				
	ANTUAN R LEWIS					
	NEW Registered Office Address:					
	7231 W CAUSEWAY BLVD		 			
		, FL_33619				

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

D. Signature of a member or authorized representative of a member

Printed or typed name of signee

ANTUAN R LEWIS

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the 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 writing of this change.

Registered Agent