

120 000239655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04-05-2022 01:15 PM \$05.00

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2022 MAY 13 PM 4:17
STATE OF NEW YORK
TALLMAN COUNTY CLERK

5/18/2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: B & EB TRANSPORT LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ebony Anderson

Name of Person

B & EB TRANSPORT LLC

Firm/Company

5547 Lochdale Dr.

Address

Orlando FL. 32818

City/State and Zip Code

ebony.anderson916@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ebony Anderson

Name of Person

at (321)

527-9035

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 amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 MAY 13 AM 7:52

SECRETARY OF STATE
TALLAHASSEE, FL

April 28, 2022

EBONY ANDERSON
5547 LOCHDALE DRIVE
ORLANDO, FL 32818

SUBJECT: B&EB TRANSPORT LLC
Ref. Number: L20000239655

We have received your document for B&EB TRANSPORT LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The current name of the entity is as referenced above. Please correct your document accordingly.

The entity's date of incorporation/organization must be listed in the document.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 522A00009919

**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: B&EB TRANSPORT LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

5547 Lochdale Dr
Orlando FL 32818

5547 Lochdale Dr
Orlando FL 32818

3. 8-07-2020
Date of filing/registration in Florida

4. 120000239655
Document number

5. (a) _____
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

United States Corporation Agent, INC
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

5575 S. Semoran Blvd. suite 36
Orlando FL 32822

FILED
2022 MAY 13 PM 4:17
TALLAHASSEE, FL

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Ebony Anderson
NEW Registered Office Address:

5547 Lochdale Dr
Orlando FL 32818

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.

Ebony Anderson
Signature of a member or authorized representative of a member

Ebony Anderson
Printed or typed name of signee

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.

Ebony Anderson
Signature of Registered Agent