## L20000252604

(Re	questor's Name)	·				
(Ad	dress)					
(Ad	dress)					
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to	Filing Officer:					

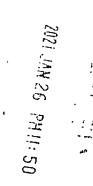
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MAR () 6 2021 S. YOUNG



## COVER LETTER

Division of Corporations	
SUBJECT: Garry Walker Trucking Name of Limited Limbs	LLC ility 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 foll	owing:
Garry Walker Name of Person	
Garry Waller Trucking, LLC Firm/Company	
PD Boy 943 Address	
Coleman FL 33521 City/State and Zip Code	
Garry Darker trucking (agmail cam) E-mail address: (to be used for future annual report notificat	ion)
For further information concerning this matter, please call:	
Garry Valler at 863 Name of Person	Nea Code & Daytime Telephone Number
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

☐ \$55 Filing Fee & Certified Copy

S25 Filing Fee

Enclosed is a check for the following amount:

## • 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.

	$\Lambda$					•
1. Na	une of the limited liability company: Garry W	alke	r Truck	ling, LLC	· <del></del>	
2. (a)	4101 F Warm Springs Ave.		(b) <u> </u>	Box 943	<del> </del>	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		.\	dailing address of limite ( <u>Note: MAY BE POS</u>	-	
	Coleman, FL 33521		_Cole	eman, FL	3352,	<u> </u>
	8-17-2020		Laoc	00252604	!	
3.	Date of filing/registration in Florida	-1.		Document number		
5. (a)	Garry Walker					
	Registered Agent and Registered Office shown on the records o	f the Flori	da Dept. of State	:		
	4101 E Warm Springs Ave					
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE.	SS)			
					2021	
	Coleman .F	ı. <u>3</u> 3	3521	•	1921 JAN 26	•
				•	26	
(b)	Jenilee Walker	1.43.55	<del></del> _		. "U	. :
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office 2	iddress:		· P III	•
	4101 E Warm Springs A NEW Registered Office Address:	νę	(Same)	)	50	
	Coleman	L_3	352/			
If the li	imited liability company is not organized under the la	ws of th	e State of Flo	rida, it is hereby co	nfirmed tha	it after the
change	or changes are made, the Florida street address of the	e registe	red office and	the business office	of the regi	stered
was/we	vill be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members	of the li	mited liability	company or as oth	.nai ine ena ierwise prov	nge(s) vided in
the arti	cles of organization or the operating agreement of the	limited				
Signal	are of a hyember or authorized representative of a member		Ga	rry Walke Printed or typed name	<u> </u>	
	by accept the appointment as registered agent and ag	roo ta a				: with the
provisi the obl to merc	by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I I'in writing of this change.	ree to de perform d for in hereby c	erance of my d Chapter 605, Confirm that th	etty. Tharmer agre uties, and Lam Jam F.S. Or, if this doc he limited liability o	e to comply iliar with a zument is be zompany ha	end accept eing filed is been
<u> Le</u>	mile Oalker) re of Registered Agent					