LZ0000265728

(Requestor's Name)		
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(C) (C) (C) (C) (D) (A)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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Certified Copies Certificates of Status		
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	COVER LI	ETTER
TO: Registration Section Division of Corporations		
PRESTON TOWING AND TR SUBJECT:	ANSPORT LLC	
	Name of Limited Lia	ability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	l Office Change and f	fee(s) are submitted for filing.
Please return all correspondence concerning	ng this matter to the f	iollowing:
JOHNNY, MEDRANO, JR		
Name of Person		_
PRESTON TOWING AND TRANSPORT LL	.c	
Firm/Company		_
6813 MERION CT		
Address		<u> </u>
NORTH LAUDERDALE, FL 33068		
City/State and Zip Co	ode	_
parisac1@yahoo.com		
E-mail address: (to be used for future	e annual report notific	cation)
For further information concerning this ma	atter, please call:	
Jamie Quiles	754 at (244-0588
Name of Person		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 follow	wing amount:	
■ \$25 Filing Fee	□ \$ 5	5 Filing Fee & Certified Copy

&TATEMENT 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.

I. Na	ame of the limited liability company: PRESTON TO	WING AND T	G AND TRANSPORT LLC		
2. (a)	6813 MERION CT	(b) ⁶	5813 MERION CT		
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	North Laudedale, FL 33068	<u>N</u>	Jorth Laudedale, FL 33068		
	08/26/2020		0000265728		
3. 5. (a)	Date of filing/registration in Florida JOHNNY, MEDRANO, JR	4.	Document number		
()	Registered Agent and Registered Office shown on the records 6813 MARION CT	of the Florida De	•		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	2020 OCT		
	North Lauderdale, I	FL	AND UNITED TO		
(b)	JOHNNY, MEDRANO, JR		SSEE, FL		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office addre	<u>ss:</u>		
	6813 MERION CT				
	NEW Registered Office Address:				
	North Laudedale, 1	FL_33068			
thange igent v was/we	imited liability company is not organized under the lear changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	he registered of liability comp s of the limited	office and the business office of the registered pany, it is hereby confirmed that the change(s) d hability company or as otherwise provided in		
	Johnny Medrano- Ir	Johnny	Medrano JR		
Signat	ture of a member or authorized representative of a member		Printed or typed name of signee		
l heret provisi he obl o mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and complet igations of my position as registered agent as provia dy reflect a change in the registered office address, a Fin writing of the change	gree to act in te performanc led for in Cha I hereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent