

# L20000348884

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

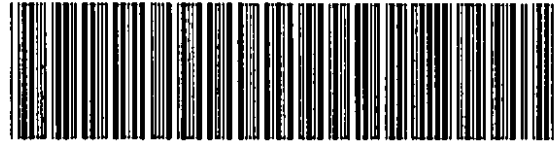
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL

2022 AUG - 1 AM 8:59

FILED

Grass Roots Transport, LLC

16051 SE Hwy 42

Weirsdale, FL 32195

July 27, 2022

To: Florida Department of State Division of Corporations

Document Number: L20000348884

Dear Sir:

I am writing to inform you of changes being made to my business: Grass Roots Transport, LLC. Mr Yeuell Watkins is stepping down from manager and registered agent while Mr Brett Swigert Esq will be stepping in as registered agent. I, David Larson will remain as owner and president of this business.

The Attached documents included in this mailing are from your website. Both Mr Watkins and Mr Swigert have signed there respective pages. I am also including payments for changes.

Thank you for your assistance in this matter.

A handwritten signature in black ink, appearing to read "David Larson", written in a cursive style.

David Larson

Owner,

Grass Roots Transport, LLC

352-638-4826

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GRASS ROOTS 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:

YUELO WATKINS  
Name of Person

GRASS ROOTS TRANSPORT  
Firm/Company

16051 SE Hwy 42  
Address

WEIPSKA, FL 32195  
City/State and Zip Code

DTL ARSON 66 @gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID LARSON at ( 352 ) 638 4826  
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 following amount:

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
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

1. Name of the limited liability company: GRASS ROOTS TRANSPORT, LLC

2. (a) 16051 SE Hwy 42 Weirsdale, FL (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)

16051 SE Hwy 42  
Weirsdale, FL 32195

3. 11/03/2020 4. L20000348884  
Date of filing/registration in Florida Document number

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

26430 SAVAGE CIRCLE  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Hawie in The Hills, FL 34737

(b) BRETT L. SWIGERT, P.A.  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

1231 N. County Road 452  
NEW Registered Office Address:

EUSTIS, FL 32726

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that 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 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.

[Signature]  
Signature of a member or authorized representative of a member

DAVID LARSON  
Printed or typed name of signer

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 understand 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 notified in writing of this change.

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