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Division of Corporations

Fax Number : (850)617-6383

From:

: REGISTERED AGENTS INC. Account Name

Account Number : I20090000081

: (307)200-2803

Phone Fax Number

: (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			
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LLC REGISTERED AGENT CHANGE TRENDING CHANGES TRUCKING LLC

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MAY 19 2021

M. SOLOMON

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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.

1 107 100	TDENINI		HANG	ES TRUCK	TNICLL		
L. Na	me of the limited liability company: TRENDII	NG C	HANG	E3 IRUCK	.1140 L		
2. (a)	4300 Biscayne Blvd	(b) 4300 Biscayne Blvd					
·	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	Suite 203	Suite 203					
	Miami, FL 33137		Miami, F	L 33137			
	12/04/20	١	_200003	79655			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	Karl Dieujuste						
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	:			
	3631 AVE MONTRESSOR						
	Registered Office Address (MUST BE FLORIDA STREET			₹ <u>~</u> (, • ; ;	2021 MAY		
						<u>→</u>	
	DELRAY BEACH	33445			ASS.	7 - 8	
	, , ,	·			E in the second		ri
(b)	Registered Agents Inc.				FLOR	AM IO: 10	Ċ
(,)	Enter name of NEW Registered Agent and/or NEW Registered	d Office add	ress:		38.A.	75°	
	7901 4th St N				7-	0	
	NEW Registered Office Address:						
	STE 300						
	St. Petersburg	33702					
					6° 1 st.	6	
the cha agent v was/wa	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the regis iability co of the limi	tered office mpany, it is ited liability	and the business of hereby confirmed t company or as other	fice of the	registe inge(s)	ered
R:1	us tark	Rile	y Park				
	ture of a member or authorized representative of a member			Printed or typed name of			
provisi the obt to mer	by accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I dim writing of this change. Bill Havre - Assistar	ed for in C hereby co	ince of my a Thapter 605 infirm that i	acity. I further agreduties, and I am fam futies, and I am fam , F.S. Or, if this doc the limited liability c	e to compl iliar with i tument is b company h	y with and according files	the cept led
Signatu	re of Registered Agent						

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