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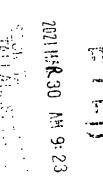
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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03/30/21--01016--015 **25.00



D. BRUCE MAY 20 2021

COVER LETTER

TO:	Registration Section Division of Corporations		; ,			
SUBJ		Name of Limited	Liability Company			
Dear S	Sir or Madam:					
	nclosed Registered Agent/Registered	Office Change an	d fee(s) are submitted for fi	iling.		
	return all correspondence concerning	_		S		
YEINI	ER SANCHEZ BALLESTER					
	Name of Person					
	Firm/Company					
1101 F	PINE RIDGE CIR W					
-	Address					
BRAN	DON, FL 33511			ź.	20	
	City/State and Zip Coo	de		第 5	02! HA ∤ 30	Ţ
yeinie	rsanchez@gmail.com				بر 3	
	E-mail address: (to be used for future	annual report not	ification)	_		, '
For fu	rther information concerning this ma	tter, please call:			<u>йн</u> 9:	-196
YEINI	ER SANCHEZ BALLESTER	813 at (750-6380	(- = = = = = = = = = = = = = = = = = =	23	
	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 Corporat The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	tions asssee eet, Suite 810		
	Enclosed is a check for the follow	ving amount:				
	\$25 Filing Fee		\$55 Filing Fee & Certified	Сору		

INHS18 (2/14)

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. Na	ame of the limited liability company: ALBERTRANSI	PORT, LI	.C	·,, ··	·		
2 (2)		(h)				
Σ. (α)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(· /	Mailing address of (Note: MAY BE	limited liabil	ity comp	any:
	1101 PINE RIDGE CIR W		1101 PINI	E RIDGE CIR W			
	BRANDON FL, 33511	BRANDON FL. 33511					
	02/02/2021		1.210000583	776			
3.	Date of filing/registration in Florida	4.		Document num	iber		
- 4	_ •						
5. (a)	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of Stat	e:			
	SR. YEINIER SANCHEZ BALLESTER						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u></u>	_			
	1101 PINE RIDGE CIR	7137 37 20 231.7	***				
				_			
	BRANDON F	L 33511	····	<u></u>		207	
					E	2021 MA R 30	
(b)				-	; -	7	7 ; 100
	Enter name of NEW Registered Agent and/or NEW Registered	d Office ac	<u>ldress</u> :			30	
	VENUED CANCLIEZ DALLECTED				<i>?</i>)	77	• f
	YEINIER SANCHEZ BALLESTER NEW Registered Office Address:			_	•	ထု	فرده
	HOT PINE RIDGE CIR W				1-	(C)	
	HOLLING KILCIE CIK W			_			
	BRANDON . FI	33511 L					
change agent v was/we the arti- Signa I here provise the oblion meronotified	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agriculture 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 d in writing of this change.	e register ability ec of the lin limited YEI ree to acc perform d for in (ed office anompany, it is inited liability com NIER SANC ance of my a Chapter 605	d the business of shereby confirm y company or as apany. CHEZ BALLESTI Printed or typed activ. I further eduties, and I am in F.S. Or, if this	ffice of the ned that the sotherwise ER same of signer to configure to	e registe e chang e provid	ered se(s) sled in with the slacept ag filed