Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations Fax Number : (850)617-6383

Account Name : LEGALZOOM.COM INC. Account Number : 120010000062

Phone Fax Number : (323)962-8600 : (323)962-3889

Enler the email address for this business entity to be used for full maintain the properties of the control of Email Address:

> LLC REGISTERED AGENT CHANGE SUN TRANSPORT LLC

Certificate of Status 0 Certified Copy j 02 Page Count \$55.00 Estimated Charge

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Help

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.

Na	me of the limited liability company: SUN TRANS	PORT	LLC		
(a)	119 West 17th St.	(t	, 1317 ED	GEWATER DR. 1941	
(0)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	``	Mailing address of limited liability company: (Note: MAX BE POST OFFICE BOX)		
	Apopka, FL 32703	_	ORLAND	O, FL 32804	
	05/13/2021	_	L2100022	3089	
	Date of filing/registration in Florida	4.	1	Document number	
(a)	Nishaldson O. Madeus				
(b)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 119 West 17th St.				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	Apopka	32703			
	UNITED STATES CORPORATION AGENTS, INC. Enter name of NEW Registered Agent and/or NEW Registered Office address: 5575 S. Semoran Blvd., Suite 36		FILEI 2821 AUG - 4 SEGPT HANNE ALL ANASSEE		
	NEW Registered Office Address:			#	
	Orlando F	32822		£ 5	
e cha ent v as/wa	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited for authorized by an affirmative vote of the members icles of organization or the operating agreement of the	t the reginability of the line	istered office ompany, it is nited liability	hereby confirmed that the change(s) company or as otherwise provided in pany.	
44	IN ACASIM NAMEUA ture of a member or authorized representative of a member	1.413		Printed or typed name of signee	
here rovisi e obi mer	by accept the appointment as registered agent and agents of all statutes relative to the proper and complet ligations of my position as registered agent as providely reflect a change in the registered office address, if an accordance of this change. CHEYENNE MOSELEY, ASSISTANT SECRETA	ed for in hereby	Chapter 605.	F.S. Or. if this document is being fil	

Signature of Registered Agent