## Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000301747 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 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:		
Emat.	MUUI ESS.		

## LLC REGISTERED AGENT CHANGE MACW FLEET DRIVING LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

AUG 1 1 2021

A. LUNT

Electronic Filing Menu

Corporate Filing Menu

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.

	me of the limited liability company:	W FLEET DRIVING LLC
	8333 NW 53RD STREET	(b) 8333 NW 53RD STREET
2. (a)	Principal office address of limited liability compa  (Note: MUST BE STREET ADDRESS)	
	450	450
	DORAL, FL 33166	DORAL, FL 33166
	06/22/21	L21000289784
3.	Date of filing/registration in Florida	4. Document number
5. (a)	WILTON ESCARMANT	
J. (a)	Registered Agent and Registered Office shown on the rec	ords of the Florida Dept. of State:
	5456 NW 190 STREET	<b>282)</b>
	Registered Office Address (MUST BE FLORIDA ST	REET ADDRESS)
	MIAMI	
(b)	Registered Agents Inc.  Enter name of NEW Registered Agent and/or NEW Registered Agent Age	eistered Office address:
	STE 300	
	St. Petersburg	, <sub>FL</sub> 33702
the cha agent was/w	ange or changes are made, the Florida street add will be identical. Or in the case of a Florida lit	the laws of the State of Florida, it is hereby confirmed that after ress of the registered office and the business office of the registe a little diability company, it is hereby confirmed that the change(s) abbers of the limited liability company or as otherwise provided it of the limited liability company.  Riley Park
Signa	nture of a member or authorized representative of a member	Printed or typed name of signee
provis the ob to mer notifie	ions of all statutes relative to the proper and co ligations of my position as registered agent as f welv reflect a change in the registered office add d in writing of this change.	ind agree to act in this capacity. I further agree to comply with implete performance of my duties, and I am familiar with and accrevited for in Chapter 605, F.S. Or, if this document is being fixess, I hereby confirm that the limited liability company has been sistant Secretary

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