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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

| TO: Registration Section Division of Corporations | · |
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| SUBJECT: FREFDOM RUNNER Name of Limited Like | S TRAINS PORT D |
| Dear Sir or Madam: | |
| The enclosed Registered Agent/Registered Office Change and f | ec(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the fo | ollowing: |
| Danian I Siah Mckinney Name of Person | |
| FREFDON RUWWERS & TRansport & | Moving LLC |
| 6063 gibson ave Address | _ |
| City/State and Zip Code | _ |
| Jack M.L. Kinney 142 @ 9 Mail. (My E-mail address: (to be used for future annual report notific | eation) |
| For further information concerning this matter, please call: | |
| Damian MKinney at (813) 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 |

\$55 Filing Fee & Certified Copy

INHS18 (2/14)

□ \$25 Filing Fee

Enclosed is a check for the following amount:

\$TATEMENT 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.

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

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