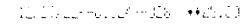
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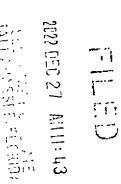
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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A. RIVERS MAR - 8 2023

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: LION HAUL AND TRUC	CKING
	ne of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
ROBIN JONES	
. Name of Person	
LION HAUL AND TRUCK	ING
Firm/Company	
8927 HYPOLUXO RD SUITE A-4	4 #129
Address	
LAKE WORTH, FL 33467	
City/State and Zip Code	
LIONHAULTRUCKING@GMAIL.	СОМ
E-mail address: (to be used for future ann	nual report notification)
For further information concerning this matter,	please call:
ROBIN JONES	at (561 ) 797-8770
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	rananassee, Florida 32314
Enclosed is a check for the following	amount:
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

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.

I. Nai	me of the limited liability company: LION HAU	JL /	AND TR	RUCKING		
	9351 TALWAY CIRCLE	(	<sub>b)</sub> 9351 T	ALWAY CIR	CLE	
z. (u) _	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			failing address of lim (Note: MAY BE PO	nited liability com	
	BOYNTON BEACH, FL 33472	_	BOYNT	ON BEACH	, FL 33472	2
	8/11/2021	_		0360299		
3.	Date of filing/registration in Florida	4.		Document number	er	
5. (a)	ROBIN BEECHAM-JONES		<u>.</u> .			
	Registered Agent and Registered Office shown on the records of the 9351 TALWAY CIRCLE		<u> </u>	: -		
	Registered Office Address (MUST BE FLORIDA STREET A		<u> </u>			
	BOYNTON BEACH .FL	3347	<u>'2</u>			
(b)	Registered Agents Inc				2022 DEC	Ti
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office :	iddress:		0.27	
	7901 4th St N				, - , - ,	, , ) ;
	NEW Registered Office Address: STE 300				ANTI: 43	Ü
	St. Petersburg	3370	)2	_	er C	
the cha agent v was/w the arti	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the re ibility f the l limite	company, it i imited liabilit d liability con	s hereby confirmed y company or as	ed that the cha otherwise pro	nge(s)
_	by accept the appointment as registered agent and agr	ee to c	et in this cap	acity. I further a	gree to compl	v with the

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Bill Havre - Assistant Secretary

Signature of Registered Agent