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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 5842097 8276536

AUTHORIZATION : THE MAN

COST LIMIT : \$ 25.00

ORDER DATE: March 31, 2022

ORDER TIME : 3:05 PM

ORDER NO. : 584209-022

CUSTOMER NO: 8276536

CHANGE OF AGENT

NAME: DEDICATED NEW YORK HOLDING,

LLC

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CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

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: DEDICATED No	EW YO	RK	HOLDING	G, LLC
2. (a)	1395 NW 167TH STREET		(b)	1395 NW	167TH STREET
(w)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MIAMI, FL 33169	_		MIAMI, FI	L 33169
	09/16/2021		L	21000411	286
3. 5. (a)	Date of filing/registration in Florida CHANDLER, KATHRYN	4.			Document number
J. (u)	Registered Agent and Registered Office shown on the records of 1395 NW 167TH STREET	the Florio	da U	ept. of State	– e:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES	<u>5.S)</u>		-
	MIAMI, FI_	33169			2022 APR -5
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company	Office a	ddr	ess:	PR-5 AM 8: 20 ARY OF STATE WHASSEE, FL
	NEW Registered Office Address:				F. 22
	1201 Hays Street				;;; G
	Tallahassee . FL	32301			_
change agent w was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	register bility c f the lir	red om nite	office and pany, it is ad liability	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
	ture of a member or authorized representative of a member	Jill	Cil	mi, Autho	rized Person
Signat	ture of a member or authorized representative of a member				Printed or typed name of signee
provision the obli to mere notified	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. I have a change in the registered office address. I have a change in the complete address.	ee to ac perforn I for in perchy c	t ir. ian Ch onj	this cape ce of my e apter 605 irm that t	ncity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
	re of Registered Agent E. Kirby, Asst. Vice President of Corporation Service Division of Corporations • P.O. I				isee, FL 32314

FILING FEE: \$25.00

INHS18 (2/14)