3/1/24, 12/07 PM

Division of Corporations

## Florida Department of State

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.

(((H24000082726 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 : COMPUTERSHARE Account Number : 110432003053

Phone : (561)694-8107

Fax Number : (561)214-8442

\*\*Snter the email address for this business entity to be used for future Cannual report mailings. Enter only one email address please.\*\*

Cannual report mailings. Enter only one email address please.\*\*

## LLC REGISTERED AGENT CHANGE FORTY-ONE LOGISTICS, LLC

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

11.13 - 4 2624

171

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.

I. Na	ame of the limited liability company:FORTY-ONE LC	GISTIC	CS.	LLC
2. (a)	189 S ORANGE AVE STE 1170		(b)	189 S ORANGE AVE STE 1170
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	ORLANDO, FL 32801	<b></b>		ORLANDO, FL 32801
	10/01/2021		1.	21000430158
3. 5. (a)	Date of filing/registration in Florida STEVEN E MCCRANEY	4.	<del></del>	Document number
. (4)	Registered Agent and Registered Office shown on the records of 189 S ORANGE AVE STE 1170	the Flori	da E	
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRE.	<u>SS)</u>	2024 HAR - 1 PM 3: 5 TALLAHASSEE
(b)	ORLANDO	32801		HASS.
	Corporate Creations Network Inc.			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office :	addr	en:
	801 US Highway 1			
	NEW Registered Office Address:			
	North Palm Beach, FL	33408		
change agent v was/we	imited liability company is not organized under the lave or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liagree authorized by an affirmative vote of the members cicles of organization or the operating agreement of the	registe ability of of the li	red com mit	office and the business office of the registered upany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
	Nat	Ke	evin	Duteau, Attorney-in-Fact
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to mer	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I i d'in writing of this change.	ree to a perfort d for in hereby	ct ir nan Ch con	o this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been

Kevin Duteau, Special Secretary