Florida Department of State Original Carporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (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	·							
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LLC REGISTERED AGENT CHANGE **SNYDER SHIPPING & LOGISTICS LLC**

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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, N	ame of the limited liability company: Snyder	Shippin	g & Logistics LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) _	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.	01/25/2022 Date of filing/registration in Florida	<u>L</u> .	22000045429 Document number
	SNVDED TVLED 1		
	1821 SW 65TH AVE Registered Office Address (MUST BE FLORIDA STREET)	- 	
	BOCA RATON		
	Northwest Registered Agent	POZZ JUN	
	Enter name of NEW Registered Agent and/or NEW Register 7901 4th St N	2022 JUN -7 PM 4: 1	
	NEW Registered Office Address: STE 300		
	St. Petersburg	FL 33702	
the chagent was/w	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the membe ticles of organization or the operating agreement of	s of the registed d liability compars of the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in
	ature of a member or authorized representative of a member		Printed or typed name of signee
Sign	ature of a member or authorized representative of a member		ranted of typed name of signed

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 to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been marified in writing of this change.

Tom Glover - Assistant Secretary

Signature of Registered Agent