

L2200059652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

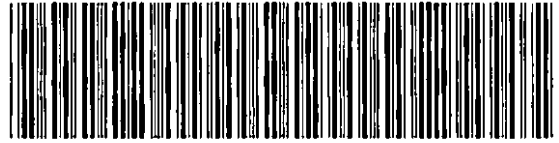
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
RECEIVED

cf 8/5/2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Detour Logistics, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tyrel J. Herder
Name of Person

Detour Logistics, LLC
Firm/Company

1533 Pintail Dr.
Address

St. Johns FL. 32259
City/State and Zip Code

detourlogisticsllc@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tyrel Herder at (780) 781-5107
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

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 5, 2022

TYREL J HERDER
1533 PINTAIL DRIVE
ST. JOHNS, FL 32259

SUBJECT: DETOUR LOGISTICS, LLC
Ref. Number: L22000059652

We have received your document for DETOUR LOGISTICS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 222A00017553

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. Name of the limited liability company: Detour Logistics, LLC

2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)

1325 W. Colonial Dr. Orlando, FL 32804

(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

1533 Pintail Dr. St. Johns, FL 3225

3. Date of filing/registration in Florida 02/03/2022

4. Document number L2200059652

5. (a) Anthony, Robert W Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1325 W. Colonial Dr. Orlando, FL 32804

(b) Tyrel J. Herder Enter name of NEW Registered Agent and/or NEW Registered Office address:

1533 Pintail Dr. NEW Registered Office Address: St. Johns FL 32259

2022 AUG -5 PM 1:00

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Tyrel J. Herder Printed or typed name of signer

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 notified in writing of this change.

Signature of Registered Agent