

Florida Department o

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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: Fields Trucking S	ervice	FTS LLC	
2. (a)	800 OCALA RD STE 300-148		(b) 800 OCA	LA RD STE 300-148
- . (-)	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)
	TALLAHASSEE, FL 32304	_	TALLAH	ASSEE, FL 32304
	05/05/2022		L22000213	404
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	LEGALINC CORPORATE SERVICES INC.			
- (-	Registered Agent and Registered Office shown on the records of 476 Riverside Ave.	the Flo	rida Dept. of Sta	te:
	Registered Office Address (MUST BE FLORIDA STREET	<u>ADDR</u>	<u>ESS)</u>	
	Jacksonville . FI	3220	2	_
(b)	Corporate Creations Network Inc.		2024 F 6 7 2 9	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	1 Office	address:	59
	801 US Highway 1			- Pi
	NEW Registered Office Address:			
	North Palm Beach , FI	3340	8	_
chang agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	regis ability of the	tered office ar company, it i limited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
	Kristen Espinales		·	es, Attorney-in-Fact
Sign	ature of a member or authorized representative of a member	_		Printed or typed name of signee
I here provis	eby accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete livations of my position as registered agent as provide	ree to perfo d for i	act in this cap rmance of my n Chapter 60	pacity. I further agree to comply with the duties, and I am familiar with and accept 5. 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.

Kristen Espinales Kristen Espinales, Special Secretary

Signature of Registered Agent