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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone

: (307)200-2803

Fax Number : (855)330-1010

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LLC REGISTERED AGENT CHANGE **DON7 TRANSPORTATION LLC**

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M. SOLOMON MAY 19 2023

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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.

2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(1		failing address of limited l		
	05/24/22		L22000	0240257		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	LEGALCORP SOLUTIONS, LLC					
	Registered Agent and Registered Office shown on the records of	the Florid	a Dept, of State	-		
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRES.	<u> </u>			2023 MAY 18 PH
	3440 W HOLLYWOOD BLVD. SUITE 415				52	-
	HOLLYWOOD FI.	3302	1		22	8
(b)	Registered Agents Inc				7	州 2: 22
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ac	dress:		មគ្គ	22
	7901 4th St N					
	NEW Registered Office Address:					
	STE 300					
	St. PetersburgFL	3370	2			
he cha igent v vas/we	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cless of organization of the operating agreement of the	vs of the the regi ability c of the lin limited	State of Flo stered office ompany, it is nited liability	and the business offi- hereby confirmed that company or as other pany.	ce of the re at the chang	gisterec ge(s)

Signature of a member or authorized representative of a member

Printed or typed name of signee

Thereby 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 natified in writing of this change.

Days Days

David Roberts - Assistant Secretary

Signature of Registered Agent