Division of Corporations

Florida Department of State

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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

Fax Number

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LLC REGISTERED AGENT CHANGE TRULY LOGISTICS, LLC

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K. Brumbley

5/1/2024 07:25:54 RDT. . . To: 18506176383 Page: 2/2 Fax: 8134365206

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	same of the limited liability company: TRULY LOGIST	ICS, LL	С	
2. (a)				Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3. 5. (a	06/20/2022 Date of filing/registration in Florida INC AUTHORITY RA	 _ - 4.	L2200028	0055 Document number
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 390 NORTH ORANGE AVE., STE 2300-N			
(b)	ORLANDO, FL 32801 NORTHWEST REGISTERED AGENT LLC Enter name of NEW Registered Agent and/or NEW Registered Office address:			2024 HEY - 1
	7901 4TH ST N NEW Registered Office Address: STE 300			PH 5: 58
	ST. PETERSBURG	33702		_
chang agent was/v the ar	limited liability company is not organized under the law ge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	register bility co f the lin	ed office ar ompany, it i nited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
Sign	ature of a member of authorized representative of a member	Nat	Smith	Printed or typed name of signee
I her provi the ob to me notifi	eby accept the appointment as registered agent and agrisions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address, I had a mitting of this change. Taylor Newman	ee to ac perform I for in (pereby c	t in this cap ance of my Chapter 60, onfirm that	acity I further goree to comply with the
Signy	ure of Registered Agent			