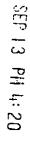
Office Use Only



400393953444

09/13/22--01019--017 **55.00

2022 SEP 13 PH 4: 20





COVER LETTER

SUBJECT: Thunder Trucker 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:									
Eduardo Hernandez-Cartagena Name of Person Thunder Trycker LLC. Firm/Company 3205 Florenge Day Address St Cland Fl. 34772 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:									
Eduardo Hernandez at (504) 313-2971 ? Name of Person Area Code & Daytime Telephone Number									
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303									

\$55 Filing Fee & Certified Copy

INHS18 (2/14)

□ \$25 Filing Fee

Enclosed is a check for the following amount:

TO:

Registration Section Division of Corporations

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.

			,	į	C		•	
I. Nan	ne of the limited liabi	lity company: <u> </u>	inver Tr	ucker	LLC			
2. (a) _	3205 F/0	renze Way	(b	3205	Florenz	e_4	194	
	Principal office address of limited liability company: Mailing address of limited liabi (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFF					ted liability		
		Cloyd FL	71/777					2.7
-	SGINT	C/OUG PL	39/12	541/17	C7044	FC	39/1	
					 –			
	7/29/	122-		1220	003349	35		
3.	Date of filing	/registration in Florida	4,		ocument number			
5 (a)	Edyarda Ila	ernander-Ca	rtagena	î.				
3. (d) <u>1</u>	Registered Agent and Reg	stered Office shown on the re	ecords of the Florida	Dept. of State:				
		prenze Ugy						
İ	Registered Office Address	MUST BE FLORIDAS	STREET ADDRESS	Ď.		5	2 0.	
-						Î	∑.	•
	Saint	Cloud	, FL_ <u>3</u> Y	1772		-	2077 SEP 3	T)
41.		Hernander		e ca				3
-		stered Agent and/or NEW R	- /			•	نا الط الله الط	
		<i>-</i> ,	1.				20	
		-Jorenze	Way					
į	NEW Registered Office /	Address:	(
		<u> </u>						
	Saint	loud	.FL 34	272				
				Cama o o C 121 mode	la di di kanalari a	6	that often	e la la
change of	or changes are made,	ny is not organized unde the Florida street addres	s of the registere	ed office and th	ie business offic	e of the r	egistered	
was/wep	e authorized by an af	i the case of a Florida lin firmative vote of the me	embers of the lim	iited liability o	ompany or as ot	that the cherwise p	change(s) provided i	n
the articl	les of organization of	the operating agreemen	it of the limited l	iability compa	$ \begin{array}{c c} \text{ny.} \\ \hat{\mathbf{Q}} & \mathbf{A} & \mathbf{A} \end{array} $			
Signatu	re of a momber or authori	zed representative of a memb		$\frac{O8}{P_1}$	inted or typed name	of signee		
I hereby	accept the appointn	ent as registered agent	and agree to act	in this capaci	t w. I further agr	ee to con	ply with t	he
provisio	ns of all statutes rela	tive to the proper and co t as registered agent as p the registered office add	omplete performa	ance of my dut	ies, and Lam Jar	nıllar wil	n ana acc	:ері
to merel notified	v reflectsa change in in striting of this cha	ine registered office add ge.	iress, i nereby co	onjirm inai ine	атива навину	company	nas neen	ı
Signature	f Registered Agent		.					
Signature	Registered Agent		▲ D O Roy 631	74 Tallahaan	. FI 22214			

FILING FEE: \$25.00

INHS18 (2/14)