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Account Name : COMPUTERSHARE Account Number : 110432003053 : (561)694-8107 Phone Fax Number : (561)214-8442

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## LLC REGISTERED AGENT CHANGE

## KINGMAR TRANSPORT LIMITED LIABILITY COMPANY

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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: KingMar Transpo	rt Limited	Liability Company
2. (a)	2421 candlewick st	(b	)
_, ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	Deltona.Florida (US)32738	_	
	10/10/2022 12:00:00 AM	I	1.22000436722
3.	Date of filing/registration in Florida	4.	Document number
5. (a	LEGALING CORPORATE SERVICES INC.		
<i>.</i> (u	Registered Agent and Registered Office shown on the records of 476 Riverside Ave.	the Florida	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	Jacksonville, FL	32202	202
(b)	Corporate Creations Network Inc.		2023 DEC
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		dress:
	801 US Highway 1		8 PH 12:
	NEW Registered Office Address:		12: 35
	North Palm Beach FL	33408	
chang agent was/w	limited liability company is not organized under the lave or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of the organization or the operating agreement of the	registered bility con of the limi limited li	d office and the business office of the registered mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in ability company.
- 0'		Danie	elle W. Gossman, Special Manager
·	ature of a member of authorized representative of a member		Printed or typed name of signee
provis the ob to mei	eby accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ligations of the complete address, I I d'in writing of this change.	ee to act i performa I for in C vereby co	in this capacity. I further agree to comply with the nee of my duties, and I am Jamiliar with and accept hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been
igit	Danielle Gos	ssman, S	pecial Secretary
Signat	ure of Registered Agent		