## Florida Department of State Division of Corporations

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## LLC REGISTERED AGENT CHANGE SALT LINE HAULING LLC

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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.

	ame of the limited liability company: salt line hauling I	<del></del>	
2. (a)	650 Talwood cir APT C	(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)
	Brandon Florida (US)33510		
	11/16/2022 12:00:00 AM	1.2200	00489831
B.	Date of filing/registration in Florida	— <u> </u>	Document number
· (\	LEGALING CORPORATE SERVICES INC.		
5. (a)	Registered Agent and Registered Office shown on the records of 476 Riverside Ave.	<u> </u>	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	2023 DEC -8 PM 4: 30 TALLAHASSEE FLORID
	Jacksonville , FI	32202	885
(b)	Corporate Creations Network Inc.		PM 4: 30
	Enter name of NEW Registered Agent and/or NEW Registered	l Office address:	3c 3c
	801 US Highway 1		<u></u>
	NEW Registered Office Address:		
	North Palm Beach . FL	33408	· <u>·</u>
nange gent w as/we	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liams or cauthorized by an affirmative vote of the members of the organization or the operating agreement of the	ws of the State registered offi ability compan of the limited li limited liabilit	ice and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company.
Signat	ure of a member or authorized representative of a member	Damelle W	Gossman, Special Manager
hereh	ny accent the appointment as registered agent and our	ee to act in this performance o	Printed or typed name of signee s capacity. I further agree to comply with the f my duties, and I am familiar with and accept
rovisio le obli la mere otifica	ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address. If I in writing of the change.		or 605, F.S. Or, if this document is being filed that the limited liability company has been ecial Secretary