## - L23000001845

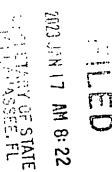
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## **COVER LETTER**

TO: Registration Sc Division of Cor			·•
YNJ Trans	port LLC		
		of Limited Li	ability Company
Dear Sir or Madam:			
The enclosed Registered	d Agent/Registered Offic	e Change and	fee(s) are submitted for filing.
Please return all corresp	ondence concerning this	matter to the 1	following:
Baltazar Velez			
	Name of Person	<del></del>	<del></del>
YNJ Transport LLC			
	Firm/Company	<u></u>	
1809 Piedmont Ct			
	Address		
Mascotte, FL 34753			
Cit	y/State and Zip Code		_
ynjtransportllc16@gmail.	com		
E-mail address: (to	be used for future annu	al report notifi	cation)
For further information	concerning this matter, p	lease call:	
Baltazar Velez		305 at (	776-4287
Name o	f Person		Area Code & Daytime Telephone Number
Mailing Addr Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a c	heck for the following a	mount:	
S25 Filing Fe	ee e	<b>□</b> \$5	55 Filing Fee & Certified Copy
INHS18 (2/14)			

## 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. YNJ Transport LLC Name of the limited liability company: 1809 Piedmont Ct 2. (a) Mailing address of limited liability company: Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX) Mascotte, FL 34753 1/13/2023 L23000007845 Date of filing/registration in Florida 3. 4. Document number United States Corporation Agents, Inc. 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 476 Riverside Ave Registered Office Address (MUST BE FLORIDA STREET ADDRESS) Jacksonville Baltazar Velez (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: 1809 Piedmont Ct **NEW** Registered Office Address: FL 34753 Mascotte If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Baltazar Velez Signature of a member of authorized representative of a member Printed or typed name of signee I hereby 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 notified in writing of this change.

Battar Vely
Signature of Registered Agent