Division of Corporations

1/28/25, 4:01 PM

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To:

Division of Corporations

To: 18506176383

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 : (813)436-5206 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:		

LLC REGISTERED AGENT CHANGE ONSTAR TRANSPORTATION, 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. ••

L N	iame of the limited liability company:	PORTA	TIO	N, LLC	
2. (a)		í	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)
	7901 4th St N STE 300			6501 Adin	ngton Expressway B105 #7374
	St. Petersburg FL 33702	_		Jacksonvil	ille FL 32211
	01/23/23		L.	230000429	961
3.	Date of filing/registration in Florida	4.	_		Document number
5. (a	LEGALING CORPORATE SERVICES INC.				
J. (u	Registered Agent and Registered Office shown on the records of the	he Floric	ta D	Dept. of Stat	 ite:
	476 RIVERSIDE AVE				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
					2025
(b) _.	JACKSONVILLE . FL	32202			FILT 2025 JAN 28 SECRITAR TALLARASS
	Registered Agents Inc			m m	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	7901 4th St N				70%07 25 VIE 8: 24
	NEW Registered Office Address:	· · · · · · · · · · · · · · · · · · ·			- ·
	STE 300	····			_
	St. Petersburg , FL	33702			_
the ch agent was/w the art	limited liability company is not organized under the law ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the reg bility c f the lir	iste on nit	ered offic ipany, it i ed liabilit	te and the business office of the registere is hereby confirmed that the change(s) ty company or as otherwise provided in
	ature of a member or authorized representative of a member				Robin Jones
				_	Printed or typed name of signee
provis the ob to mer	thy accept the appointment as registered agent and agre- tions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change.	perforn I för in ereby o	et in nar Ch con	n this cap ace of my apter 602 firm that	pacity. I further agree to comply with the duties, and I am familiar with and accep 5, F.S. Or, if this document is being filed the limited liability company has been
	David Corets David Roberts - Assistant Ser	cretary			

Signature of Registered Agent