Florida Department of St<u>ate</u>

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

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

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

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LLC REGISTERED AGENT CHANGE GERMAIN FAMILY TRUCKING LLC

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MAR 0 5 2024

K. Brumbley

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.

. (a)	7373 Habbersham dr		(b) 7373 Habb		persham dr	
. (Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(-)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Orlando, FL 32818	_ _		Orlando, l	FL 32818	
	02/14/2023		[.	.23000082	229	
. (a)	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.	-		Document number	
	Registered Agent and Registered Office shown on the records of 476 Riverside Ave.	the Flo	rida	Dept. of Su	ate:	
	Registered Office Address (MUST BE FLORIDA STREET 2	IDDRI	ESS)			
	Jacksonville, FL	3220	?		- - 20	
(b)	Corporate Creations Network Inc.				2024 HAR - 4	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	add	<u>гезу</u> :	· ~ = 23	
	801 US Highway 1					
	NEW Registered Office Address:				3: 22	
	North Palm Beach, FL	33408	}			
hange gent w ras/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	regist bility f the l	erec cor limi	l office ar apany, it ted liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
	Kristen Espinales	K	Crist	en Espinal	es. Attorney-in-Fact	
Signat	ture of a member or authorized representative of a member	_			Printed or typed name of signee	
	by accept the appointment as registered agent and agri ons of all statutes relative to the proper and complete igations of my position as registered agent as provided ty reflect a change in the registered office address. I h	ee to e	ict i	n this car	pacity. I further agree to comply with the	

Signature of Registered Agent