9/19/2019

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000281473 3)))



H190002814733ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PARANET CORPORATION SERVICES, INC.

Account Number : I20090000069 Phone : (800)277-9977 Fax Number : (800)815-0477

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

Email Address: mbenton@pfgc.com

LLC REGISTERED AGENT CHANGE EBY-BROWN TRANSPORTATION, LLC

Certificate of Status 0 0 Certified Copy 01 Page Count Estimated Charge \$25.00

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SEP 24 2019

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COVER LETTER

TO: Registration Section Division of Corporations		,
SUBJECT: EBY-BROWN TRANSPORT.	ATION, LLC	
	of Limited L	iability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offic	e Change and	fee(s) are submitted for filling.
Please return all correspondence concerning this	matter to the	following:
Patricia A. Boverle		
Name of Person		
Paranet Corporation Services, Inc.		
Firm/Company		-
3675 Crestwood Parkway, Suite 350		
Address		
Duluth, GA 30096		
City/State and Zip Code		
mbenton @pfgc.com		
E-mail address: (to be used for future annu	ual report noti:	lication)
Por further information concerning this matter,	please call:	
Patricia A. Boverie	800 at (277-9977
Name of Person		Ares Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	-	AILING ADDRESS:
		egistmation Section
Division of Corporations		ivision of Corporations O. Box 6327
Clifton Building 2661 Executive Center Circle		oliahassee, Florida 32314
Tallahassee, Florida 32301	••	
Enclosed is a check for the following	amount:	
☑ \$25 Filing Fee	<u> </u>	55 Filing Fee & Certified Copy
INHS18 (2/14)		

(((H19000281473 3)))

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)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		1	Mailing address of limited Hability company: (Note: MAY BE POST OFFICE BOX)
	1415 W Diehl Rd, Ste 300N		1415 W	Diehl Rd, Ste 300N
	NAPERVILLE, IL 60563			VILLE, IL 60563
				
	02/24/2003	.	M03000	
	Date of filing/registration in Florida	4.		Document number
(a)	Registered Agent and Registered Office shows on the records of	4.1 P/ -		_
	Registered Agent and Registered Office shows on the records of C T CORPORATION SYSTEM	The Flank	la Dept. of Sint	c:
	Registered Office Address (NUST BE FLORIDA STREET	ADDRES	<u>:2)</u>	•
	1200 SOUTH PINE ISLAND ROAD			_
	PLANTATION	33324	1	
		<u> </u>	· · · · · · · · · · · · · · · · · · ·	•
		u	<u>*</u>	•
(b)				-
(b)				-
(b)				<u>-</u>
(b)	Enter name of NEW Registered Agent and/or NEW Registere			- -
(b)	Enter name of <u>NEW Resistered Agent</u> and/or <u>NEW Resisters</u> NRAI Services, Inc.			- -
(b)	Entername of NEW Resistered Agent and/or NEW Registered NRAI Services, Inc. NEW Registered Office Address: 1200 SOUTH PINE ISLAND ROAD	d Office a	skireza:	- -
	Enter name of NEW Registered Agent and/or NEW Registered NRAI Services, Inc. NEW Registered Office Address: 1200 SOUTH PINE ISLAND ROAD PLANTATION F	d Office a	skireza:	- -
the l	Entername of NEW Resistered Agent and/or NEW Registered NRAI Services, Inc. NEW Registered Office Address: 1200 SOUTH PINE ISLAND ROAD	33324 aws of the regiability of the limited	dires: 4 e State of Fi gistered offic company, it is mited liabilit liability com	e and the business office of the registers is hereby confirmed that the change(s) by company or as otherwise provided in mpany.
the less than th	Enternance of NEW Resistered Agent and/or NEW Registered NRAI Services, Inc. NEW Registered Office Address: 1200 SOUTH PINE ISLAND ROAD PLANTATION Finited liability company is not organized under the leanage or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited liability company is not organized under the leanage or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited liability and affirmative water of the members.	33324 aws of the regiability of the limited	dires: 4 e State of Figistered officerompany, it is mitted liability	e and the business office of the registers is hereby confirmed that the change(s) by company or as otherwise provided in mpany.

Division of Corporations • P.O. Box 6327 • Tallubussec, PL 32314 FILING FEE: \$25.00