Division of Corporations Electronic Filing Cover Sheet

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(((H19000225163 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274

Fax Number

: (888)706-7274

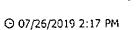
\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

## LLC REGISTERED AGENT CHANGE CARIBTRANS LOGISTICS, LLC

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

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Help



## **COVER LETTER**

→ 18506176383

TO:	Registration Section		
	Division of Corporations		

SUBJECT: Caribtrans Logistics, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Castillo			
Name of Person		_	
Registered Agent Solutions, Inc.			
Firm/Company		<del>_</del>	
1701 Directors Blvd, Suite 300			
Address		<del></del>	
Austin, TX 78744			
City/State and Zip Code		<del></del>	
notices@rasi.com			
E-mail address: (to be used for future ann	nual report notif	ication)	
For further information concerning this matter	, please call:		
Mary Castillo	888 at (	705-7274	
Name of Person		Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	M	AILING ADDRESS:	
Registration Section		gistration Section	
Division of Corporations		vision of Corporations	
Clifton Building		D. Box 6327	
2661 Executive Center Circle Tall		dlahassee, Florida 32314	
Tallahassee, Florida 32301			
Enclosed is a check for the following	g amount:		
☑ \$25 Filing Fee	<b>□</b> \$5	55 Filing Fee & Certified Copy	
INHS18 (2/14)			

15129570210

## 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)	nme of the limited liability company: Caribtra			
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	ailing address of limited liability company (Note: MAY BE POST OFFICE ROX)	
	501 AVENUE P RIVIERA BEACH, FL 33404	501 AVE RIVIERA	ENUE P A BEACH, FL 33404	
	11/9/2005	M050	000006246	
	Date of filing/registration in Florida	4.	Document number	
	REGISTERED AGENT SOLU  Registered Office Address MUST BE FLORIDA STREET  155 OFFICE PLAZA DR. SU	<del> </del>		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	<u> </u>	
	TALLAHASSEE,	32301 L	્રું (C <b>ાંડ</b>	
Ьì		L.	JUL 2	
(b)			2019 JUL 29 SECRETARY	
(b)		d Office address:		
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office address:	19 JUL 29 PM 4: 09 CRETARY OF STATE FALLAHASSEE, FL	

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.

/s/ J	<u>lohn</u>	J. I	Fiser

John J. Fiser

President

Signature of a member or authorized representative of a member

Printed or typed name of signee

Thereby 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 ified in writing of this change.

Mackenzie Hart Assistant Secretary