

MO1 000000272

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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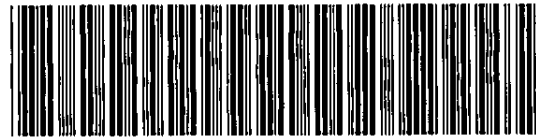
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2013 JUL 31 PM 4:40
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155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 07/31/2013

NAME: SPECIALTY TRAILER SUPPLY, LLC

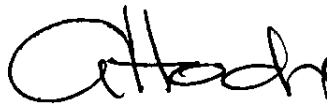
TYPE OF FILING: CHANGE OF AGENT

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TALLAHASSEE, FLORIDA

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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 608.416 or 608.508, 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.

1. Name of the limited liability company: Specialty Trailer Supply, LLC

2. (a) Principal office address of limited liability company: 573 Hawthorne Ave
Athens GA 30606
*(Note: **MUST BE STREET ADDRESS**)*

(b) Mailing address of limited liability company: 573 Hawthorne Ave
Athens GA 30606
*(Note: **MAY BE POST OFFICE BOX**)*

01/16/2007
3. Date of filing/registration in Florida

M07000000272
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State

Registered Agent:

CT Corporation System

Registered Office Address:

1200 South Pine Island Road
Plantation FL 33324

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

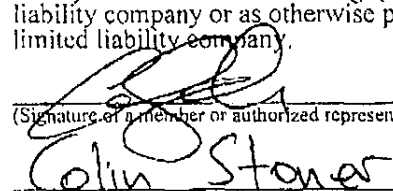
NEW Registered Agent:

National Corporate Research, Ltd., Inc.

NEW Registered Office Address:
(MUST BE FLORIDA STREET ADDRESS)

155 Office Plaza Drive
Tallahassee, FL 32301

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.


(Signature of a member or authorized representative of a member)

Colin Stoner
(Printed or typed name of signer)

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 608, 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.


(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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2013 JUL 31 AM 9:00
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TALLAHASSEE, FL 32304