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## LLC REGISTERED AGENT CHANGE HERITAGE LOGISTICS, LLC

Certificate of Status	. 0
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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.

1.	Na	me of the limited liability company:	LLC						
2.	(a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (	(b)					
		1000 EAST WARRENVILLE ROAD, SUITE 100		1000 EAST WARRENVILLE ROAD. SUITE 100			100		
		NAPERVILLE, IL 60563		NAPERVILLE, IL 60563					
		09/08/2014		M140000063	383				
3.		Date of filing/registration in Florida	4.		Document numb	er	•		
5.	()	CORPORATION SERVICE COMPANY							
J.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
		Registered Office Address (MUST BE FLORIDA STREET A							
		1201 HAYS STREET				ĭ¥I IS	20:		
		Tallahassee , FL	32301			TCR	20 F		
(b)		C T Corporation System		2020 FEB   2					
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			TOF STA	AM 9= 40			
		NEW Registered Office Address:			ı	DE E	ړ, 0		
		1200 South Pine Island Road							
		Plantation, FL	33324						
th ag wa th	e cha ent vas/wa e art	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lice authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the reability f the l limite	gistered office company, it is imited liability	e and the busines is hereby confirm y company or as ipany.	s office (	or the r	egisterea	
_	$\Xi$	ture of a member or authorized representative of a member		сриние восни	Printed or typed na	inte of sign	ee		
l pr th to no	here ovis e obi mer otifie	by accept the appointment as registered agent and agrifons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I definitely that the change is the change.	ee to c perfor d for i vereby	vet in this cape mance of my in Chapter 602 confirm that i				with the nd accept ing filed s heen	
<u>S</u>	ignati	re of Registered Agent Michele Holden, Asst. Secretary							

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00