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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.

Email Address:			
CINALL MUULCOO.			 _

LLC REGISTERED AGENT CHANGE INTER-RAIL TRANSPORT OF MIAMI, LLC

Certificate of Status	0
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Page Count	03
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Corporate Filing Menu

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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	Inter-Rail Transport of M	iami, LLC				
GODGI		Name of Limited Liability Company				
Dear S	ir or Madam:					
The en	closed Registered Agent/Regist	ered Office Change and	fee(s) are submitted for filing.			
Please	return all correspondence conce	erning this matter to the	following:			
Lori W	halen					
	Name of Pers	on				
Registe	ered Agent Solutions, Inc.					
	Firm/Compar	y				
Corpor	rate Center One, 5301 Southwest P	kwy, Ste 400				
	Address					
Austin	, TX 78735					
-	City/State and Zi	p Code				
	E-mail address; (to be used for f	uturc annual report noti	fication)			
For fu	rther information concerning th	is matter, please call:				
Lori V	Vhalen	888 at (705-7274			
	Name of Person		Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the	following amount:				
	□ \$25 Filing Fee		\$55 Filing Fee & Certified Copy			
INHS	18 (2/14)					

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: Inter-Rail Transp	port of Miami, LLC	
2. (a)	115 LAWYERS ROW	(b) 115 LAWYERS ROW	
<u> </u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	:
	SUITE 3	SUITE 3	
	CENTERVILLE, MD 21617	CENTERVILLE, MD 21617	
	11/16/2016	M16000009214	
3.	Date of filing/registration in Florida	4. Document number	
	TRAC - THE REGISTERED AGENT COMPANY		
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET) 236 E. 6TH AVENUE	ADDRESS)	
	TALLAHASSEE . FL	32303	
(b)	Registered Agent Solutions, Inc. Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 2894 Remington Green Ln.	29	1,47.5 14,134-4.33
	NEW Registered Office Address:		
	Ste. A	2: 02	
	Tallahassee, FL	32308	
change agent v was/we	or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited his	the state of the s	d s) Lin
/s/	Jaclyn Wright	Jaclyn Wright Authorized Person	
I here provisi the obi to mer	by accept the appointment as registered agent and agricons 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 if in writing of this change. Mackenzie Hibler, Asst, Secretary of the management of the change.	Printed or typed name of signee ree to act in this capacity. I further agree to comply with performance of my duties, and I am familiar with and a rd for in Chapter 605, F.S. Or, if this document is being hereby confirm that the limited liability company has be etary	i the ocept filed on