

M180000000026

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

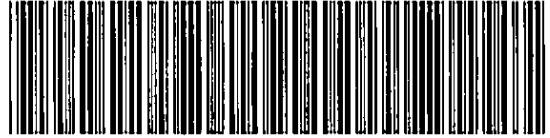
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800313425638

05/21/18--01014--003 **25.00

10:41 V 2-1014 4.06
05/21/18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 23, 2018

DEAN WIKENHEISER
800 NICOLLET MALL SUITE 1150
MINNEAPOLIS, MN 55402

SUBJECT: SOUTHEASTERN TRAFFIC SUPPLY, LLC
Ref. Number: M18000000026

We have received your document for SOUTHEASTERN TRAFFIC SUPPLY, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 318A00010764

RECEIVED
2018 JUN -5 AM 10:40
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
ASSEMBLY

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Southeastern Traffic Supply, 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:

Dean Wikenheiser

Name of Person

Stone Arch Capital

Firm/Company

800 Nicollet Mall Suite 1150

Address

Minneapolis, MN 55402

City/State and Zip Code

dwikenheiser@stonearchcapital.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dean Wikenheiser at (612) 317-2989

Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee \$55 Filing Fee & Certified Copy

10-11-11 V 317-2989
dwikenheiser@stonearchcapital.com

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. Name of the limited liability company: Southeastern Traffic Supply, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

2306 South Kings Highway

2306 South Kings Highway

Ft. Pierce, FL 34945

Ft. Pierce, FL 34945

January 2, 2018

M1800000026

3. Date of filing/registration in Florida

4. Document number

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

C T Corporation System

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

1200 South Pine Island Road

Plantation, FL 33324

(b) Joel Grebenick

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

Southeastern Traffic Supply, LLC

NEW Registered Office Address:

2306 South Kings Highway

Ft. Pierce, FL 34945

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.

Joel Grebenick
Signature of a member or authorized representative of a member

Joel Grebenick
Printed or typed name of signee

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 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 notified in writing of this change.

By: Joel Grebenick
Signature of Registered Agent