## M1800000026

(Requestor's Name)					
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(//					
PICK-UP WAIT MAIL					
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2023 AFR 19 AH 9:27

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 684411 8360878

AUTHORIZATION : (Springly and)

COST LIMIT : \$'254'00

ORDER DATE : April 18, 2023

ORDER TIME : 1:33 PM

ORDER NO. : 684411-027

CUSTOMER NO: 8360878

\_\_\_\_\_

## CHANGE OF AGENT

NAME: SOUTHEASTERN TRAFFIC SUPPLY,

LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

## 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. N	ame of the limited liability company:	ERN TRA	FFIC	C SUPPLY, LLC
2. (a)	2306 South Kings Highway	(	b) 33	3300 Highlands Pkwy SE, Suite 110
<u></u> (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company; (Note: MAY BE POST OFFICE BOX)	
	Ft. Pierce, FL 34945		Sn	Smyrna, GA 30082
	<del></del>			
	01/02/2018		M1	18000000026
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	)			
` '	Registered Agent and Registered Office shown on the records of	of the Floric	la Dep	ept, of State:
	Sinar, Brian, VP Operations FL			
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRES	<u>(S)</u>	
	2306 South Kings Highway			
	Ft. Pierce	., 34945		<del></del>
	,	. l>		<del></del>
(b)				2023 APR
(0)	Enter name of NEW Registered Agent and/or NEW Register	ed Office a	ddress	
	Corporation Service Company			
	NEW Registered Office Address:			<u> </u>
	1201 Hays Street			
	Tallahassee , l	32301		
change agent was/w the art  Signa  I here provis the obto mer	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members icles of organization or the operating agreement of the appointment as registered agent and as it is a complete to the proper and complete ligations of all statutes relative to the proper and complete ligations of my position as registered agent as provided in writing of this change.	ne register liability c s of the lir ne limited Flo gree to ac	red of ompa nited liabil ossie i	office and the business office of the registered bany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in bility company.  Holmes, Authorized Person  Printed or typed name of signce  this capacity. I further agree to comply with the

Grace E. Kirby, Asst. Vice President

Signature of Registered Agent