

M180000005139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

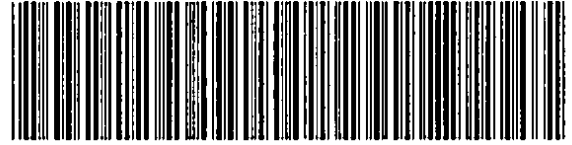
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FILED
-2020 MAR 23 PM 2:31
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32302

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TALLAHASSEE, FL 32302

MAR 23 2020

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 20, 2020

SCOTT CUMMINGS
GLOBAL OCEAN AGENCY LINES, LLC
9224 HOLLISTON CREEK PL
WINTER GARDEN, FL 34787

SUBJECT: GLOBAL OCEAN AGENCY LINES, L.L.C.
Ref. Number: M18000005139

We have received your document for GLOBAL OCEAN AGENCY LINES, L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 220A00003761

2020 FEB 23 AM 11:31

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLOBAL OCEAN AGENCY LINES
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:

SCOTT CUMMINGS
Name of Person

GOAL
Firm/Company

9224 HOLLISTON CREEK PL
Address

WINTER GARDEN, FL 34787
City/State and Zip Code

scott@goaltrans.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SCOTT CUMMINGS at (847) 668-4985
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

ALREADY
PAID

☐ \$55 Filing Fee & Certified Copy

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: GLOBAL OCEAN AGENCY LINES, LLC

2. (a) GOAL (b) GOAL

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

5401 S. KIRKMAN RD #310
ORLANDO FL 32819

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

9224 HOLLISTON CREEK PL
WINTER GARDEN FL 34787

3. MAY 29, 2018 Date of filing/registration in Florida 4. M18000005139 Document number

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

1180 PONCE DE LEON BLVD #601
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

CLERMONT FL 33756

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2020 MAR 23 PM 2:31
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

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

9224 HOLLISTON CREEK PL
NEW Registered Office Address:

WINTER GARDEN FL 34787

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]
Signature of a member or authorized representative of a member

SCOTT CUMMINGS
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 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.

[Signature]
Signature of Registered Agent