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Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C / CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. [1]

Email Address:

LLC REGISTERED AGENT CHANGE WAYFAIR TRANSPORTATION LLC

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|-----------------------|--------|
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| Page Count | 02 |
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Help

To:

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: Wayfair Transport | ation L | LC. | | | |
|-------------------------------|---|--|---|--|--|--|
| 2. (a) | J. Contay Physic | | (b) 4 Copley Place | | | |
| | Principal office address of hunted liability company: (<u>Note: MUST BE STREET ADDRESS</u>) | ` | | dailing address of limited fiab (<u>Note: MAY BE POST OF</u> | | |
| | Boston, MA 02116 | - | Boston, MA 02116 | | | |
| | 08/13/2018 | | M18000007- | 459 | | |
| 3. 5. (a) | Date of filing/registration in Florida INCORPORATING SERVICES, LTD. | 4. | | Document number | | |
| J. (11) | Registered Agent and Registered Office shown on the records of the Florida Dept, of State: | | | | | |
| | Registered Office Address - <u>(MUST BE FLORIDA STREET A</u> 1540 GLENWAY DRIVE | <u>DDRES</u> | <u>S1</u> | | 2024 HIS 28 | |
| | TALLAHASSEE , FL | 32301 | | · - | 등 3 | |
| (b) | C T Corporation System | | | : | | |
| (67 | Enter name of NEW Registered Agent and/or NEW Registered Office address: | | | *** | 65:01k4 | |
| | NEW Registered Office Address: | | | | | |
| | 1200 South Pine Island Road | | | | | |
| | Plantation FL_ | 33324 | | | | |
| the cha agent v was/wa | imited liability company is not organized under the law- inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l | s of the the regi bility co the lir | istered office ompany, it is nited liability | and the business office hereby confirmed that to company or as otherwi | of the registered he change(s) | |
| | (S) ENPIQUE COLBERT | EN | RIQUE COLL | BERT, MANAGER | | |
| | ture of a member or authorized representative of a member | | | Printed or typed name of sign | | |
| provisi the obl to merc | by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided By reflect a change in the registered office address, I ha | te to ac perform I for in êrehy c | t in this cape tance of my c Chapter 605 onfirm that t | icity. I further agree to hities, and I am familiar , F.S. Or, if this docume he limited liability comp | comply with the with and accept int is being filed any has been | |
| notified By: | t in writing of this change. | | CK, ASSISTANT | | | |
| | re of Registered Agent | F FIAIC VI | was majalaniki . | ARRIVE (MIS) | | |