M20000011508

(Requestor's Name)	
(ivequestor's riame)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MA	AIL
(Business Entity Name)	
(Document Number)	
(Document Namber)	
Certified Copies Certificates of Status _	<u>. </u>
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2021 SEP 23 PH I

RECEIVED

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	:	I20000	0000195				
REFERENCE	:	010145	835437				
AUTHORIZATION	· :		Selena-				
COST LIMIT	:	\$/25.0	00				
ORDER DATE : September 15, 2	021						
ORDER TIME : 5:27 PM							
ORDER NO. : 010145-004							
CUSTOMER NO: 8354376							
•			·				
CHANGE OF AGENT							
NAME: ARSCOTT TRUC	K LE	ASING,	LLC				
PLEASE RETURN THE FOLLOWING AS	S PR	OOF OF	FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSON: Evliena Baker	r						

EXAMINER'S INITIALS:

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	ame of the limited liability company: ARSCOTT	TRUCK LEA	SING, LLC			
=- (a)	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)); 	<u> </u>	Mailing address	of limited liability company: BE POST OFFICE BOX)	
	2441 S STATE RD 7 HWY 441		5100 H	DLABIRD AVE		
	FORT LAUDERDALE, FL 3331		BALTIMORE, MD 21224			
	12/10/2020		M200000	011508		
3.	Date of filing/registration in Florida	4.	•	Document ne	ımber	
5. (a)						
v. (u)	Registered Agent and Registered Office shown on the reco	rds of the Florid	a Dept. of St	ate:		
	Registered Office Address (MUST BE FLORIDA STR	REET ADDRES	<u></u>	_	202 SEL	
	2441 S. State Road 7				2021 SEP SECRETA	
	Fort Lauderdale	, FL 33317		_	> P	
(h)		-		_		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u>		ldress:	_	9: 54 8: 54	
	Corporation Service Company				m 🖛	
	NEW Registered Office Address:					
	1201 Hays Street			<u> </u>		
	Tallahassee	FL				
change agent w was/wo	imited liability company is not organized under the or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limite authorized by an affirmative vote of the members of organization or the operating agreement of	ne laws of the of the registere ed liability co pers of the lim	ed office ar impany, it iited liabili	nd the business is hereby confi- ty company or	office of the registered rined that the change(s)	
	Xie & Court	Jill (Cilmi, Auth	orized Person		
Signat	ture of a member or authorized representative of a member			Printed or typec	I name of signee	
provision the oblition to mere	by accept the appointment as registered agent and ons of all statules relative to the proper and comp igations of my position as registered agent as pro by reflect a change in the registered office addres I in writing of this change	d agree to act plete performe wided for in C ss. I hereby co	in this cap ance of my Thapter 60, onfirm that	oucity. I further duties, and I a 5, F.S. Or, if th the limited liat	r agree to comply with the m familiar with and accept his document is being filed bility company has been	
	ne of Registered Agent	Grace E. Kir	by. Asst. V	/ice President		