M21000007521

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200393040662

2022 AUG 22 PM 4: 24 SUGARE DE STATE

A. BUTLER AUG 23 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO.	: I2000000195				
REFERENCE	: 895445, 7918422				
AUTHORIZATION	Spull de man				
COST LIMIT					
ORDER DATE : August 19, 2022	·				
ORDER TIME : 1:51 PM					
ORDER NO. : 895445-082					
CUSTOMER NO: 7918422					
	· • • • • • • • • • • • • • • • • • • •				
CHANGE OF AGENT					
NAME: BOYLE TRANSPORTATION SERVICES, LLC					
PLEASE RETURN THE FOLLOWING A	S PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Bake	er				
E	XAMINER'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. N	ame of the limited liability company: BOYLE TRANS	SPORTA	TION SERV	/ICES, LLC
2. (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)
	130 SHARP RD.		740 N M	AIN STREET
	MARLTON, NJ 08053	_	BULLS	GAP, TN 37711
	06/16/2021		M210000	07521
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
J. (a)	Registered Agent and Registered Office shown on the records of COGENCY GLOBAL INC.	f the Floric	la Dept, of Sta	te:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u></u>	_
	115 NORTH CALHOUN ST. SUITE 4			
	TALLAHASSEE , F	L_32301		2022 AUG 22 2021 AUG 22
Z1. X				22 AUG 1
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	ddress:	` ig'##1
	Corporation Service Company			PN 4: 24 PN 4: 24
	NEW Registered Office Address:			24
	1201 Hays Street			_
	Tallahassee, Fi	32301		_
change agent v was/w	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e register iability co of the lin	ed office an ompany, it i nited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
	/S/ Tim George	Tim	George, Asst, S	ecretary of Barrette Outdoor Living Holdings, Inc., Member
-	ature of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to ac perform d for in hereby c	t in this cap ance of my Chapter 602 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
`	ire of Registered Agent	GRACI	E E. KIRBY	, ASST. VICE PRESIDENT