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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: America's O	1 Express Inc	poration
DOCUMENT NUMBER: <u>M</u> 8	7301	
The enclosed Statement of Change	of Registered Office/	Agent and fee are submitted for filing.
Please return all correspondence co	neerning this matter	to the following:
	rt Daven Name of Cont merica's Oil E	ect Person Apress, Inc.
	Firm/Con	npany
	P.O. BOX G	5 <i>6</i>
	Addre	SS
	Lity/State and	33547 Zip Code
E-mail address	3 (Warneilex : (to be used for fut	PCSS. Corn ure annual report notification)
For further information concerning	this matter, please ca	11:
Art Daven		at (<u>863</u>) <u>701 - 8643</u> Area Code & Daytime Telephone Number
Name of Contact Per	son	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made pa	yable to the Departn	nent of State.
P.O. Box 6	nt Section f Corporations	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of	
in order to change its registered office or registered agent, or both, in the State of Florida.	-
1. The name of the corporation: America's Cil Express, Inc.	
2. The principal office address: 5250 S. Florida Ave	
Lakeland, FL 33813	
3. The mailing address (if different): P. O. Box USU	
Lithia, FL 33547	
4. Date of incorporation/qualification: 05-14-2019 Document number: M87301	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Arthur A. Daven	
2808 Drave Field Rd	
Lakeiard, FL, 33811	
6. The name and street address of the new registered agent (if changed) and /or registered on the first of the name and street address of the new registered agent (if changed) and /or registered on the first of the name and street address of the new registered agent (if changed) and /or registered on the new registered agent (if changed) and /or registered on the new registered agent (if changed) and /or registered on the new registered agent (if changed) and /or registered on the new registered agent (if changed) and /or registered on the new registered agent (if changed) and /or registered on the new registered agent (if changed) and /or registered on the new registered agent (if changed) and /or registered on the new registered agent (if changed) and /or registered on the new registered agent (if changed) and /or registered on the new registered agent (if changed) and /or registered on the new registered agent (if changed) and /or registered agent (if changed) are registered agent (if changed) and /or registered agent (if changed) are regi	T)
Arthur A. Daven 28	2 3
5250 S. Florida Ave.	7
P.O. Box NOT acceptable	IJ
Lajedand, FL, 33813	
The street address of its registered office and the street address of the business office of its registered age as changed will be identical.	nt.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, of the corporation has been notified in writing of the change.	
Signature of an officer or director Arthur A. Daven, President Printed or typed name and title	-
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that indicorporation has been notified in writing of this change.	
Signature of Registered Agent Date	
Signature of Registered Agent Date	•
If signing on behalf of an entity:	
Typed or Printed Name	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tailahassee, FL 32314

* * * FILING FEE: \$35.00 * * *