## P04000090976

(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
·	·	·
(Do	ocument Number)	
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afroglish,

## **COVER LETTER**

TO: Amenda Division	nent Section of Corporations				
SUBJECT: KM	T Trucking Inc.				
5020201	(Name of	corporation)			
DOCUMENT N	UMBER: P04000090976	· · · · · · · · · · · · · · · · · · ·			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Paulina Flores					
	(Name of contact person)				
KMT Trucking Inc					
(Firm/Company)					
12000 SW 34th Street					
	(Address)				
Miami Fla. 33175					
(City/state and zip code)					
For further inform	nation concerning this matter, pleas	e call:			
Paulina Flores		at (718 ) 507-0248  (Area code & daytime telephone number)			
(1)	Name of contact person)	(Area code & daytime telephone number)			
Enclosed is a \$35.00 check made payable to the Department of State.					
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399			



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 6, 2005

PAULINA FLORES 12000 SW 34 ST MIAMI, FL 33175

SUBJECT: KMT TRUCKING INC Ref. Number: P04000090976

We have received your document for KMT TRUCKING INC 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 designation of the registered agent must be at a Florida street address.

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) 245-6927.

Tracy Smith Document Specialist

Letter Number: 205A00001119

Please note adduss has been corrected

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

statement of cha	ange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Floria on organized under the laws of the State o or registered agent, or both, in the State o	Florida
1. The name of	the corporation: KMT Trucking In	nc	
	office address: 12000 SW 34th		
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 6-14-04	Document number: P0400	00090976
	d street address of the current regirtment of State:	stered agent and registered office on file	with the
	Alejandro Martinez		
	1457 SW 136 Place		TAL SE
	Miami, Fla 33184		FEB 18
6. The name and (if changed):	d street address of the new registe	red agent (if changed) and /or registered of	ASSEFLECTION OF STATE
	Jorge Flores		STAILOR -
	2390 NW 51st St		
	(P.O. Box NOT	acceptable)	
	Miami Fla. 33142		<u>_</u>
The street addre as changed will	ess of its registered office and the be identical.	e street address of the business office of	fits registered agent,
Such change wa authorized by th	as authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by been notified in writing of the change.	an officer so
Paul	line of an officer or director)	Paulina Flores, President (Printed or typed name ar	
, <u>-</u>		gent and agree to act in this capacity. all statutes relative to the proper and c the obligation of my position as registe ge in the registered office address, I her change.	•
WIR	/(/TWO/U)	2-12-05	
	gnature of Registered Agent)  chalf of an entity:	(Date)	
T)	Typed or Printed Name)	_	

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