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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Pro Transport Charleston, Inc.

Name of Corporation

DOCUMENT NUMBER: 1

P07000102485

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:

Michael Shelley

Name of Contact Person

Shelley Law Firm, LLC

Firm/Company

500 S. Pointe Drive Suite 140

Address

Miami Beach, Florida 33139

City/State and Zip Code

michael@shelleylawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Shelley

,305 ,798-5522

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

-	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
	ge is submitted for a corporation organized under the laws of the State of
	to change its registered office or registered agent, or both, in the State of Floridu.
1. The name of th	e corporation: Pro Transport Charleston, Inc.
2. The principal of	office address: 10800 N.W. South River Drive Medley FL 33178
3. The mailing ad	dress (if different): P.O. Box 821700 Pembroke Pines FL 33082
4. Date of incorpo	pration/qualification: 09/13/2007 Document number: P07000102485
	street address of the current registered agent and registered office on file with the ment of State: (If resigned, enter resigned)
<u> </u>	Michael Shelley
	1521 Alton Road #870
	Miami Beach, Florida 33139
6. The name and (if changed):	Miami Beach, Florida 33139 street address of the new registered agent (if changed) and /or registered office Michael Shelley 500 South Pointe Drive Suite 140 P.O. Box NOT acceptable Miami Beach, Florida 33139
<u> </u>	Michael Shelley
;	500 South Pointe Drive Suite 140
-	P.O. Box NOT acceptable
<u> </u>	Miami Beach, Florida 33139 岩板 3
The street address as changed will be	s of its registered office and the street address of the business office of its registered agent, to identical.
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
	Oscar Acharandio, President
I hereby accept to	of an officer or director Printed or typed name and title the appointment as registered agent and agree to act in this capacity. It comply with the provisions of all statutes relative to the proper and complete ty dulies, and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Signs	T/12/16 Date
	Date of Registered Bank.
If signing on beh	an on an emity:
Тур	ped or Printed Name
	* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)