

PD8000009969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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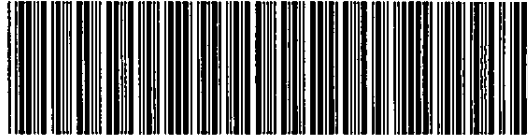
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 OCT 16 PM 3:30

OCT 16 2015

C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EXPRESS TRANSPORTATION SERVICES INC
Name of Corporation

DOCUMENT NUMBER: P0800000 9969

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:

ABDUL BASIT MAHENTI
Name of Contact Person

Firm/Company

49 N FEDERAL HWY. SUITE # 221
Address

POMPANO BEACH FL 33062
City/State and Zip Code

MAHENTI@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ABDUL BASIT MAHENTI at (954) 822 7515
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

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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: EXPRESS TRANSPORTATION SERVICES INC
2. The principal office address: 49 N FEDERAL HWY SUITE # 221
POMPANO BEACH FL 33062
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1-28-2008 Document number: P0800000 9969

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)

ABDUL BASIT MAHENTI
495 N UNIVERSITY DR
PLANTATION FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ABDUL BASIT MAHENTI
49 N FEDERAL HWY SUITE # 221
POMPANO BEACH FL 33062

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Abdul Mahenti
Signature of an officer or director

ABDUL BASIT MAHENTI 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 the corporation has been notified in writing of this change.

Abdul Mahenti
Signature of Registered Agent

10-12-15
Date

If signing on behalf of an entity:

ABDUL BASIT MAHENTI
Typed or Printed Name

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