P08000052086

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(Oity/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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fA to chy.

SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: DIAZ TRANSPORT ENTERPRISE INC.	_		
(Name of Corporation)			
DOCUMENT NUMBER: P08000052086	_		
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:			
JULISSA GARCIA (Name of Contact Person)	_		
(. mint or community			
GARCIA ACCOUNTING & TAX, CO.			
(Firm/Company)			
0000 0UEOTED AVENUE OUTE 400			
6028 CHESTER AVENUE, SUITE 108 (Address)			
JACKSONVILLE, FL 32217			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
JULISSA GARCIA at (904) 342-6703 (Name of Contact Person) (Area Code & Daytime Tel			
(Name of Contact Person) (Area Code & Daytime Tel	ephone Number)		
Enclosed is a \$35.00 check made payable to the Department of State.			
<u>Mailing Address:</u> Amendment Section Street Address: Amendment Section			
Division of Corporations Division of Corporations	ons		
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Tallahassee, FL 3230			

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

statement of chan	-	607.1508, or 617.1508, Florida Statutes, this ed under the laws of the State of FLORIDA ed agent, or both, in the State of Florida.
1. The name of th	e corporation: DIAZ TRANSPORT ENTE	RPRISE INC.
	office address: 989 MONUMENT RD APT	
3. The mailing ad	ddress (if different):	
4. Date of incorpo	oration/qualification: MAY 2008	
	street address of the current registered age	
<u>.</u>	JESSICA ALBINO	
	989 MONUMENT RD APT 415	
-	JACKSONVILLE, FL 32225	C-AT AND A
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or registered office CO. F 108
_	GARCIA ACCOUNTING & TAX,	CO.
<u>.</u>	6028 CHESTER AVENUE, SUIT	E 108
•	(P.O. Box NOT acceptable) JACKSONVILLE, FL 32217	
The street addres as changed will b	ss of its registered office and the street ac	ddress of the business office of its registered agent,
Such change was authorized by the	authorized by resolution duly adopted be board, or the corporation has been noti-	by its board of directors or by an officer so fied in writing of the change.
_ Susile (Signature	a Allaino e of an officer or director)	JESSICA ALBINO, PDT (Printed or typed name and title)
I hereby accept to I further agree to of my duties, and document is bein corporation has	he appointment as registered agent and ocomply with the provisions of all statuted I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change.	agree to act in this capacity. es relative to the proper and complete performance ation of my position as registered agent. Or, if this registered office address, I hereby confirm that the
A DUU	UPOUCI	JUNE 11, 2008
If signing on beh	naude of Registered Agent) nalf of an entity:	(Date)
(Ту	/ped or Printed Name) * * * FILING FEE	C: \$35,00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314