

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : KV CARRIER SERVICES, INC.
Account Number : I20080000029
Phone : (305) 883-6262
Fax Number : (305) 883-6605

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TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

ROYAL DIAMOND TRANSPORT, INC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ROYAL DIAMOND TRANSPORT, INC
(Name of Corporation)

DOCUMENT NUMBER: P08000064951

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:

LAZARO de Jesus Pupo
(Name of Contact Person)


(Firm/Company)

1721 SE 21ST TERRACE
(Address)

CAPE CORAL FL 33990
(City/State and Zip Code)

For further information concerning this matter, please call:

LAZARO de Jesus Pupo at (239) 574-3089
(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

CR26045 (8/05)

**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: ROYAL DIAMOND TRANSPORT, INC
2. The principal office address: 1721 SE 21ST TERRACE
CAPE CORAL FL 33990
3. The mailing address (if different): SAME

4. Date of incorporation/qualification: 7/8/2008 Document number: P08000064951

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)

LAZARD Y PUPO
1721 SE 21ST TERRACE
CAPE CORAL FL 33990

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

LAZARD DE JESUS PUPO
1721 SE 21ST TERRACE
(P.O. Box NOT acceptable)
CAPE CORAL FL 33990

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.

(Signature of an officer or director)

LAZARD DE JESUS PUPO / 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.

(Signature of Registered Agent)

3/10/2009

(Date)

If signing on behalf of an entity:

LAZARD DE JESUS PUPO
(Typed 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 (8/05)

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