P0800006724

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(1	Requestor's Name)
(,	Address)
(,	Address)
(1	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(1	Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
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10/23/08--01005--014 **35.00

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R.A. Change

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: ALL NATIONAL TRANSPOR	CATION, INC
DOCUMENT NUMBER: \$\\ \partial \text{P080000 67241}	
The enclosed Statement of Change of Registered Office/Agent and	d fee are submitted for filing.
Please return all correspondence concerning this matter to the following	owing:
Michael T. STEVENS	S-8~/ n)
ALL NATION AL TRANS (Firm/Company)	spon tyrian, butco
1210 SF 14 ST (Address)	
DEERFIELD BEACH, FL 37 (City/State and Zip Code	3 <i>44</i>
For further information concerning this matter, please call:	
Michael T. STEVENSON at (97) (Name of Contact Person) (Are	SY 961-0477 a Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of Sta	ate.
	Street Address: Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
	2661 Executive Center Circle Fallahassee, FL 32301

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

statement of change	risions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this is submitted for a corporation organized under the laws of the State of FLORIDA change its registered office or registered agent, or both, in the State of Florida.
1. The name of the c	corporation: ALL NATIONAL TRANSPORTATION, TWG
2. The principal office	ce address: 1210 SE 145T Deerfield Begon, FL 33441 CN
	2815 NW 69 Terr margle PC 33063 (OW)
3. The mailing addre	ess (if different): 1210 St 14 ST Openfield Beach, FL, 3344/
4. Date of incorporat	tion/qualification: July 16,08 Document number: P08000067241
	eet address of the current registered agent and registered office on file with the nt of State: (If resigned, enter resigned)
	BriAN B CARDOZO, Resigned
	2815 NW 69TH Terr.
	2815 NW 697H Terr. MANGATE, PL 33063 EEE ST Det address of the new registered agent (if changed) and /or registered officers.
6. The name and stre (if changed):	
	Michael T. STEVENSON PROFIES D
	12/0 SE 14 ST (P.O. Box NOT acceptable)
	Deerfield Beach, PL 3344/
	of its registered office and the street address of the husiness office of its registered agent
Such change was au authorized by the bo	athorized by resolution duly adopted by its board of directors or by an officer so oard, or the corporation has been notified in writing of the change.
Mylluf (Signature of	2. Stumpfres. Michael T. STEVENSON President an officer or director) President (Printed or typed name and title)
I hereby accept the I further agree to co of my duties, and I document is being for corporation has	appointment as registered agent and agree to act in this capacity. omply with the provisions of all statutes relative to the proper and complete performance am familiar with and accept the obligation of my position as registered agent. Or, if this iled merely to reflect a change in the registered office address, I hereby confirm that the notified in writing of this change.
(Stignatur	SEPTEMBER 30, 2008 (Date)
If signing on behalf	of an entity:
Michael To	STEVENSON, President

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