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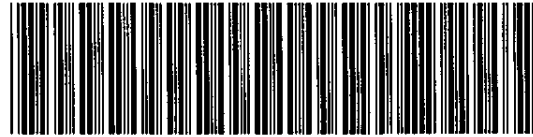
\_\_\_\_\_  
(Business Entity Name)

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(Document Number)

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T. ROBERTS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 19, 2012

HAROLD L. HOWARD  
S-L-H-TRANSPORT SOLUTIONS, INC.  
1479 N. HIGHWAY 17  
GREEN COVE SPRINGS, FL 32043

SUBJECT: S-L-H-TRANSPORT SOLUTIONS, INC.  
Ref. Number: P08000077818

We have received your document for S-L-H-TRANSPORT SOLUTIONS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts  
Regulatory Specialist II

Letter Number: 312A00025834

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** S-L-H Transport Solutions, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P080000 77818

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:

Harold L. Howard  
Name of Contact Person

S-L-H Transport Solutions, Inc.  
Firm/Company

1479 N. Highway 17  
Address

Green Cove Springs, FL 32043  
City/State and Zip Code

Sherry.slhtransport.howard@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Harold L. Howard at (904) 571-4436  
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: S-L-H Transport Solutions, Inc.  
2. The principal office address: 1479 N. Highway 17, Green Cove Springs, FL 32043  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 8/21/2008 Document number: P0800007791P

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)

Sherry L. Howard  
1479 N. Highway 17 1252 Governors Creek Drive  
Green Cove Springs, FL 32043

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

HAROLD L. HOWARD  
1479 N. HWY 17  
GREEN COVE SPRINGS, FL 32043

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.

Sherry L. Howard  
Signature of an officer or director

Sherry L. Howard 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.

Harold L. Howard  
Signature of Registered Agent

October 15, 2012  
Date

If signing on behalf of an entity:

HAROLD L. HOWARD  
Typed or Printed Name

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