

P1000008 4433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

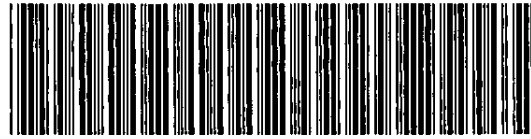
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 18 2012
T. ROBERTS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FOUR TOWERS TRANSPORTATION, INC
Name of Corporation

DOCUMENT NUMBER: P10000084433

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:

LEO TORRES

Name of Contact Person

FOUR TOWERS TRANSPORTATION, INC

Firm/Company

1661 SW 14 STREET

Address

MIAMI, FL 33145

City/State and Zip Code

LEE@FOURTOWERS.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LEO TORRES

Name of Contact Person

at (**305**) **769-2201 EXT 379**

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: FOUR TOWERS TRANSPORTATION, INC.
- 2. The principal office address: 1661 SW 14 STREET
MIAMI, FL 33145
- 3. The mailing address (if different): SAME AS ABOVE
- 4. Date of incorporation/qualification: 10/13/2010 Document number: P10000084433

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)

RUBEN R TORRES
12040 SW 51 STREET
MIAMI, FL 33175

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TALLAHASSEE, FLORIDA

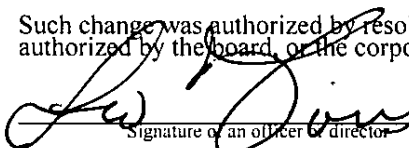
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LEO TORRES
1661 SW 14TH STREET
MIAMI, FL 33175

P.O. Box NOT acceptable

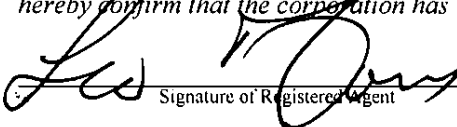
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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.


Signature of an officer or director

LEO TORRES, VP
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

06/11/2012
Date

If signing on behalf of an entity:

Typed or Printed Name

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