

# 2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P10000099368

FILED  
Oct 02, 2014  
Secretary of State

**Entity Name:** STAFFORD TRANSPORT OF ORLANDO, INC.

**Current Principal Place of Business:**

11262 BOGGY CREEK ROAD  
ORLANDO, FL 32824

**New Principal Place of Business:**

**Current Mailing Address:**

6375 DISCOVERY BLVD  
MABLETON, GA 30126

**New Mailing Address:**

**FEI Number:** 27-4217057

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** CHRIS HOLMSTROM

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** STAFFORD, CRAIG  
**Address:** 6375 DISCOVERY BLVD  
**City-St-Zip:** MABLETON, GA 30126

**Title:** CFO  
**Name:** HOLMSTROM, CHRIS  
**Address:** 6375 DISCOVERY BLVD  
**City-St-Zip:** MABLETON, GA 30126

**Title:** CEO  
**Name:** STAFFORD, CRAIG  
**Address:** 6375 DISCOVERY BLVD  
**City-St-Zip:** MABLETON, GA 30126

**Title:** DTR  
**Name:** STAFFORD, CRAIG  
**Address:** 6375 DISCOVERY BLVD  
**City-St-Zip:** MABLETON, GA 30126

**Title:** SEC  
**Name:** HOLMSTROM, CHRIS  
**Address:** 6375 DISCOVERY BLVD  
**City-St-Zip:** MABLETON, GA 30126

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** CHRIS HOLMSTROM

CFO

10/02/2014

Electronic Signature of Signing Officer or Director

Date