## P11000019191

(Requestor's Name)	
(Address)	600197644006
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	03/17/1101013022 **35.00
(Business Entity Name)	
(Document Number)  Certified Copies Certificates of Status	SECRETARY OF STATIONS ON ISON OF CORPORATIONS 11 MAR 17 MAIL: 55
Special Instructions to Filing Officer:	MII:55

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RA (1/8/11

## **COVER LETTER**

TO: Amendmen Division of	t Section Corporations		
SUBJECT:	SATNAM TRUC	KING CORP	
	Transcor C	orporation.	
DOCUMENT NUM	MBER: P11	000019691	
The enclosed Staten	nent of Change of Registered Offic	e/Agent and fee are submitted for filing.	
Please return all cor	respondence concerning this matte	r to the following:	
		-	
	HARBANS K	AUR PANNU	
<del>-</del>		ntact Person	
SATNAM TRUCKING CORP Firm/Company			
	Firm/Co	ompany	
	40500 014 04	NID OTDECT	
		PND STREET ress	
	SOUTH WEST B	ANCH, FL 33331	
-	City/State and	nd Zip Code	
diomari@ftins.net  E-mail address: (to be used for future annual report notification)			
		,	
For further informat	ion concerning this matter, please	· rall:	
To fullior informati	ion concerning this matter, piease	out.	
	ANS KAUR PANNU	at ( 954 ) 292-7256  Area Code & Daytime Telephone Number	
Nam	e of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00	check made payable to the Depar	tment of State.	
	Mailing Address: Amendment Section	Street Address: Amendment Section	
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
	Tallahassee, FL 32314	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: SATNAM TRUCKING CORP	
2. The principal office address: 16580 SW 62ND STREET	
SOUTH WEST RANCH, FL 33331	
3. The mailing address (if different):	_
4. Date of incorporation/qualification: 03/12/2011 Document number: P11000019691	<del></del>
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)	
LAKHVIR ATWAL	
16580 SW 62ND ST	
SOUTH WEST RANCHES, FL 33166	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
HARBANS KAUR PANNU	i.
16580 SW 62ND ST P.O. Box NOT acceptable	沿江
P.O. Box NOT acceptable	27
SOUTH WEST RANCHES, FL 33331	(503)
HARBANS KAUR PANNU  16580 SW 62ND ST  P.O. Box NOT acceptable  SOUTH WEST RANCHES, FL 33331  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	
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.	`
L S ATWAL Signature of an officer or director  LAKHVIR ATWAL 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.	
Harban K Gamm 3/12/11 Signature of Registered Agent 3/12/11	
If signing on behalf of an entity:	
HARBANS KAUR PANNU Typed or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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