

P110000039720

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(Requestor's Name)

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(City/State/Zip/Phone #)

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PICK-UP

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MAIL

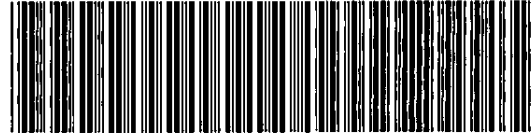
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A.

TBrown 7-5-11

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Lightning Fast Logistics Inc.  
Name of Corporation

**DOCUMENT NUMBER:** \_\_\_\_\_

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:

Lienne Paez  
Name of Contact Person

Lightning Fast Logistics Inc  
Firm/Company

6800 SW 40th St #638  
Address

Miami, FL 33155  
City/State and Zip Code

lightning fast logistics inc  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lienne Paez at ( 305 ) 333-7721  
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: Lightning Fast Logistics, Inc.  
2. The principal office address: 6800 SW 40th St #638  
Miami FL 33155  
3. The mailing address (if different): "SAME"  
4. Date of incorporation/qualification: 4-25-11 Document number: P11000039720

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)

Hector Veredun  
7690 NW 197th St  
Miami, FL 33015

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

Lienne Perez  
6800 SW 40th St #638  
P.O. Box NOT acceptable  
Miami, FL 33155

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]  
Signature of an officer or director

Lienne Perez - CEO  
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]  
Signature of Registered Agent

06/25/2011  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

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

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