

1500000 9119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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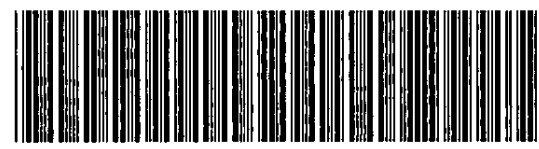
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Transfer Logistics Inc  
Name of Corporation

**DOCUMENT NUMBER:** P15000009119

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:

Geralyn Hughes Sullo  
Name of Contact Person

Transfer Logistics Inc.  
Firm/Company

6657 W. Hilger Ct.  
Address

Homosassa FL 34448  
City/State and Zip Code

gerisullo@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Geralyn Hughes Sullo at (352) 628-0043  
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: Transfer Logistics, Inc
2. The principal office address: 6657 W. Hilger Ct.  
Homosassa, FL 34448
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 1/28/15 Document number: P1500000 9119
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)

John P. McKelvey  
6657 W. Hilger Ct.  
Homosassa, FL 34448

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

Geralyn Hughes Suelo  
6657 W. Hilger Ct.  
Homosassa, FL 34448

P.O. Box NOT acceptable

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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

John P McKelvey 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.*

Geralyn Hughes Suelo  
Signature of Registered Agent

3/16/17  
Date

If signing on behalf of an entity:  
Geralyn Hughes Suelo  
Typed or Printed Name

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