

P15000029204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

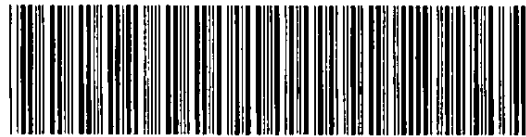
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JUN 29 2017

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17 JUN 19 PM 6:19
CLERK OF SUPERIOR COURT
JANESVILLE, WI

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AC TRADING & SHIPPING, INC.
Name of Corporation

DOCUMENT NUMBER: P15000029204

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:

STEVEN DECOSTA
Name of Contact Person

Firm/Company

2609 TUNBRIDGE LANE
Address

ST AUGUSTINE FL 32092
City/State and Zip Code

STEVENMDECOSTA@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEVEN DECOSTA at (904) 397-4644
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: AC TRADING & SHIPPING, INC.
2. The principal office address: 10300 SOUTHSIDE BLVD SUITE 3120
JACKSONVILLE FL 32256
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/27/2015 Document number: P15000029204
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)

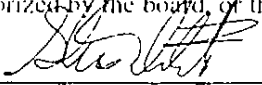
LM ACCOUNTING & PAYROLL SERVICES LLC
4241 BAYMEADOWS RD SUITE 1
JACKSONVILLE FL 32217

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

JONATHAN CRUZ
10010 SKINNER LAKE DRIVE SUITE #732
P.O. Box NOT acceptable
JACKSONVILLE FL 32246

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.

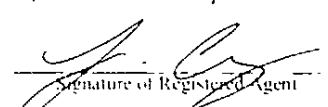


Signature of an officer or director

STEVEN DECOSTA / UPGM

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

JUNE 14th, 2017

Date

If signing on behalf of an entity:

Typed or Printed Name

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

FILED
17 JUN 19 PM 6:19
TALLAHASSEE, FLORIDA