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SECRETARY OF STATE TANASSEE FOR ORDER

AUG 1 1 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations Elite Expediting Corp. 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: Kari Whitcraft Name of Contact Person Elite Expediting Corp. Firm/Company 1660 Renaissance Commons Blvd., #2314 Boynton Beach, Florida 33426 City/State and Zip Code kwhitcraft@eliteexp.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kari Whitcraft Name of Contact Person 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

statement of change is submitted for a corpo	0502, 617.0502, 607.1508, or 617.1508, Florida Status oration organized under the laws of the State of Florid ffice or registered agent, or both, in the State of Florid	la	_
1. The name of the corporation: Elite Exp	pediting Corp.		
2. The principal office address: 1660 Re Boynton Beach, Florida 33420	naissance Commons Blvd, #2314		
3. The mailing address (if different): Sam	e as above		
4. Date of incorporation/qualification: 07/	08/2015	8797	
5. The name and street address of the currer Florida Department of State: (If resigned	nt registered agent and registered office on file with th , enter resigned)	e	
David Jay Floyd			
8251 Triana Point	Avenue		
Boynton Beach, Flo	orida 33473		
6. The name and street address of the new registered agent (if changed) and /or registered offic (if changed):			2816 AUG
REGISTI	ERED AGENTS INC.	经	-2
3030 N. Rocky Point Drive, STE 150A		0F ST	
Tampa, FL 3360	P.O. Box NOT acceptable	210 ₆	3 .
The street address of its registered office as changed will be identical.	and the street address of the business office of its reg	istered a	gent,
Such change was authorized by resolution authorized by the board, or the corporation	duly adopted by its board of directors or by an office has been notified in writing of the change.	er so	
	D. Jay Floyd		
I further agree to comply with the provision performance of my duties, and I am famili	Printed or typed name and title ered agent and agree to act in this capacity. One of all statutes relative to the proper and complete ar with and accept the obligation of my position as remerely to reflect a change in the registered office address notified in writing of this change.	registered	1
Signature Paristered and	July 25, 2016		
If signing on behalf of an entity:	Date		
Bill Havre/Assistant Secretary			
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 (03/12)

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