

7/18/2018

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : URS AGENTS LLC
Account Number : I20150000127
Phone : (800)567-4397
Fax Number : (800)567-4398

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: gee4dennis@yahoo.com

**REGISTERED AGENT CHANGE
T-MARTIN TRUCKING INC.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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2019 AUG -7 PM 2:05

AUG 08 2019

Electronic Filing Menu

Corporate Filing Menu

S. YOUNG
Help



July 23, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

T-MARTIN TRUCKING INC.
5225 NW 74TH TERRACE
LAUDERHILL, FL 33319US

SUBJECT: T-MARTIN TRUCKING INC.
REF: P15000069914

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

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DOCUMENT TO DARK

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

FAX Aud. #: H19000218797
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: T-MARTIN TRUCKING INC.

Name of Corporation

DOCUMENT NUMBER: P15000069914

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:

Foster Dennis

Name of Contact Person

T-MARTIN TRUCKING INC.

Firm/Company

5225 NW 74th Terrace

Address

Lauderhill, FL 33319

City/State and Zip Code

gee4dennis@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy Clark

Name of Contact Person

at (800) 567-4397

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

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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: T-MARTIN TRUCKING INC.
2. The principal office address: 5225 NW 74TH TERRACE LAUDERHILL, FL 33319
3. The mailing address (if different): 5225 NW 74TH TERRACE LAUDERHILL, FL 33319
4. Date of incorporation/qualification: 08/19/2015 Document number: P15000069914
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)

UNITED STATES CORPORATION AGENTS, INC.

5575 S. SEMORAN BLVD SUITE 36

ORLANDO, FL 32822

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

URS AGENTS, LLC

3458 LAKESHORE DRIVE

P.O. Box NOT acceptable

TALLAHASSEE, FL 32312

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.

Foster G. Dennis
Signature of an officer or director

FOSTER G. DENNIS / DIRECTOR
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.

Kathy Clark
Signature of Registered Agent

8/7/19
Date

If signing on behalf of an entity:

Kathy Clark, Assistant Secretary

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 (03/12)

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TALLAHASSEE, FLORIDA