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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307) 200 - 2803

Fax Number : (855)330-1010

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

Email Address:

REGISTERED AGENT CHANGE JSJ DIESEL SALES, INC.

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SEP 1 # 2013

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	inge is submitted for a corporation o	7,0502, 607,1508, or 617,1508, Flori organized under the laws of the State registered agent, or both, in the State	of florida	-
I. The name of t	the corporation: JSJ Diesel Sales, Ir	nc.		
2. The principal	office address: 5440 NW 5TH AVE			
BOCA RATO	N, FL 33487			
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 02/16/2016	Document number: P160	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
	d street address of the current register trment of State: (If resigned, enter re	ered agent and registered office on filesigned)	e with the	
	LOIACONO, JOSEPH P			
	5440 NW 5TH AVE			
	BOCA RATON, FL 33487			
6. The name and (if changed):	I street address of the new registered	d agent (if changed) and /or registered	d office	·
	Registered Agents Inc.		EP -	2-3-9-44
	3030 N. Rocky Point Dr. STE	150A	. 00	
P.O. Box NOT acceptable		> >		
	Tampa FL 33607		چ. آ س —	•-
The street address changed will	ess of its registered office and the s be identical.	treet address of the business office of	(~)	nt,
Such change was authorized by th	as authorized by resolution duly ad- ne board, or the corporation has been	opted by its board of directors or by en notified in writing of the change.	an officer so	
Couper Londono Joseph Lolacono - President		ad title		
I hereby accept I further agree of performance of agent. Or, if the	the appointment as registered age to comply with the provisions of all my duties, and I am familiar with a	nt and agree to act in this capacity. I statutes relative to the proper and i and accept the obligation of my posi o reflect a change in the registered o	complete ition as registered	
Piec Han	ne-	9/12/18		
Sig	nature of Registered Agent	Date		-
If signing on be	half of an entity:			
Bill Havre				
	yped or Printed Name			

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