## P1(00000 26292

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## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: Galaxy Freight, Inc.  Name of Corporation			
DOCUMENT NUMBER: P16000026292			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for fi	ling.		
Please return all correspondence concerning this matter to the following:			
Tom O. Williams			
Name of Contact Person			
Galaxy Freight, Inc.			
Firm/Company			
34440 Donna Vista Pl.			
Address			
Eustis, FL 32736			
City/State and Zip Code			
galaxyfreightinc@gmail.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
	<b>1</b>		
Tom O. Williams at ( 620 ) 873-0032  Name of Contact Person Area Code & Daytime Telep	<u>-</u> hone Number		
Name of Contact Person Area Code & Daytine Pelephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address: Amendment Section Amendment Section			
Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Tallahassee, FL 32301	Circle		

В	OTH FOR CORPORATIONS	ALLE AGENT OR
statement of change is submitted for a c	07.0502, 617.0502, 607.1508, or 617.150 orporation organized under the laws of the ed office or registered agent, or both, in th	ne State of Florida
I. The name of the corporation: Gal	axy Freight, Inc.	
•	440 Donna Vista Pl., Eustis, I	FL 32736
3. The mailing address (if different):		
4. Date of incorporation/qualification:	March 21, 2016 Document numbe	r: P16000026292
5. The name and street address of the cu Florida Department of State: (If resig	urrent registered agent and registered offic ned, enter resigned)	e on file with the
Barbara Per	ry / Corporation Service Com	pany
	1201 Hays Street	
	Tallahasee, FL 32301	
6. The name and street address of the na (if changed):	ew registered agent (if changed) and /or re	egistered office
	Andrea L. Williams	
	34440 Donna Vista Pl.	#A
	P.O. Box NOT acceptable	má – m
	Eustis, FL 32736	
The street address of its registered offi as changed will be identical.	ice and the street address of the business	office fits registered agent
Such change was authorized by resolut authorized by the board, or the corpora	tion duly adopted by its board of director ation has been notified in writing of the c	rs or by an officer so hange.
tom & Illland Signature of alrofficer or director		liams/Owner
I hereby accept the appointment as reg I further agree to comply with the pro- performance of my duties, and I am fa agent. Or, if this document is being fu- hereby confirm that the corporation ha	gistered agent und agree to act in this ca visions of all statutes relative to the prop miliar with and accept the obligation of led merely to reflect a change in the regi as heen notified in writing of this change	pacity. er and complete my position as registered stered office address, I
Undrea Lile Ooko	2/1	6/17

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

If signing on behalf of an entity:

Typed or Printed Name