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COVER LETTER

TO: Amendment Section Division of Corporations

DOCUMENT NUMBER:

SUBJECT: TRUCK & VAN INC

Name of Corporation

P16000032783

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:

SARITA D DE JESUS

Name of Contact Person

TRUCK & VAN INC

Firm/Company

13141 GORE RD

Address

DOVER, FL 33527

City/State and Zip Code

SARITADEL@GMAIL.COM

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

For further information concerning this matter, please call:

SARITA DE JESUS

_.813. \300-468

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:

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

statement of chair	orovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of FLORIDA r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	he corporation: TRUCK & VAN INC
2. The principal	13141 CORE PD
	DOVER, FL 33528
3. The mailing ac	ddress (if different):
4. Date of incorp	poration/qualification: 04/11/2016 Document number: P16000032783
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	SARITA D DE JESUS
	13141 GORE DR
	DOVER, FL 33527
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	SARITA DELGADO DE JESUS
	13141 GORE DR
	P.O. Box NOT acceptable
	DOVER, FL 33527
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
	SARITA D DE JESUS
_	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I in that the corporation has been notified in writing of this change.
	Date Date
If signing on bel	half of an entity:
SĄRITA D I	·
Ту	yped or Printed Name

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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