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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Jumbo Logistics Inc.

Name of Corporation

DOCUMENT NUMBERS

P1600039300

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:

Avanti Maharajh

Name of Contact Person

Jumbo Logistics Inc.

Firm/Company

6804 Cypress Walk Terrace

Address

Tamarac, FL 33321

City/State and Zip Code

amaha7@aol.com

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

For further information concerning this matter, please call:

Avanti Maharajh

.,954

6838328

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:

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 co	7.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this orporation organized under the laws of the State of FLORIDA
	office or registered agent, or both, in the State of Florida.
1. The name of the corporation: JUMI	BO LOGISTICS INC.
2. The principal office address: 0004 C	CYPRESS WALK TERRACE, TAMARAC, FL 33321
3. The mailing address (if different): SA	ME AS PRINCIPAL OFFICE
4. Date of incorporation/qualification: 5	/13/2016 Document number: P16000039300
5. The name and street address of the cur Florida Department of State: (If resign	rent registered agent and registered office on file with the ed, enter resigned)
AVANTI MAHAR	AJH SE
1509 N. STATE I	ROAD 7, J
MARGATE, FL 3	3063
6. The name and street address of the new (if changed):	w registered agent (if changed) and /or registered office
AVANTI MAHAR	AJH
6804 CYPRESS	WALK TERRACE
TAMARAC, FL 3	P.O. Box NOT acceptable 3321
The street address of its registered office as changed will be identical.	e and the street address of the business office of its registered agent,
	on duly adopted by its board of directors or by an officer so ion has been notified in writing of the change.
Signature of an officer of director	AVANTI MAHARAJH Printed or typed name and title
I hereby accept the appointment as regi. I further agree to comply with the provi. performance of my duties, and I am fam	stered agent and agree to act in this capacity. sions of all statutes relative to the proper and complete iliar with and accept the obligation of my position as registered d merely to reflect a change in the registered office address. I
Doch	5/13/2016
Signature of Registered Agen	Date
If signing on behalf of an entity:	
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 * * *