

Pinebush LLC

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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17 OCT 27 AM 10:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

flachg
OCT 31 2017

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Alliance Express inc
Name of Corporation

DOCUMENT NUMBER: P16000080701

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:

ANTHONY CARBERRY
Name of Contact Person

Alliance Express inc
Firm/Company

710 Soc Circle
Address

Palm Bay FL 32907
City/State and Zip Code

A.C. ~~Alliance~~ AllianceEXPRESS7@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTHONY CARBERRY at (321) 960 1669
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

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: Alliance Express INC
2. The principal office address: 710 SOC Circle Palm Bay FL 32909
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/03/2016 Document number: P16 0000 80701

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)

GARFIELD GREEN
710 SOC Circle Palm Bay FL 32909
RESIGN

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

ANTHONY CARJERRY
710 SOC Circle Palm Bay 32909
P.O. Box NOT acceptable
PRESIDENT

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17 OCT 27 AM 10:11
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

[Signature]
Signature of an officer or director

ANTHONY CARJERRY
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.

[Signature]
Signature of Registered Agent

10/23/2016
Date

If signing on behalf of an entity:

Typed or Printed Name

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