## 170000718908

(Requestor's Name)
(Address)
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(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Durings Falik Nama)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:

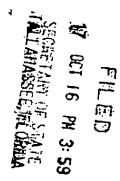
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OCT 1 8 2017 S. YOUNG



## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: 464 Logistics, Inc. Name of Corporation
DOCUMENT NUMBER: <u>P17000078908</u>
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:
Andrea Montejo Name of Contact Person
466 Logistics, In C. Firm/Company
16091 Blatt Blud. Apt 205
Weston, FL 33326 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Andrea Montejo Name of Contact Person  at (786 ) 562 - 9268 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  Street Address:  Amendment Section  Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

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

A ... 3

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
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: 666 logistics, In C
2. The principal office address: 2811 N Pine Island Pd # 103
Suncise, FL 33322
3. The mailing address (if different): 16091 Blatt Blud. Apt 205, Weston, FL 33326
4. Date of incorporation/qualification: 0912912017 Document number: P1700078908
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)
Andrea Montejo
16091 Blatt Blud Apt. 205
Weston FL 33326
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Andrea Montejo
2811 N Pine Island Rd # 103
Sunrise FL 33322
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.
Andrea Monteso Printed or typed name and the
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 spifirm that the corporation has been notified in writing of this change.
Segnature of Registered Agent 10/10/2017 Date
If signing on behalf of an entity:
Andrea Monte 10 Typed or Printed Name

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