

P17 0000 88607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

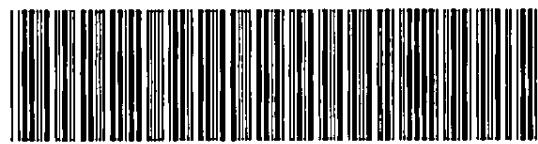
(Business Entity Name)

(Document Number)

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OF FLORIDA, BREVARD COUNTY, FL

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: H & S Trucking Inc. _____
Name of Corporation

DOCUMENT NUMBER: P17000088607

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:

David D. Humphrey _____
Name of Contact Person

Humphrey Transportation Compliance, LLC _____
Firm/Company

P.O. Box 482 _____
Address

Holland, OH 43528 _____
City State and Zip Code

david@truckingconsultant.com _____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David D. Humphrey _____ at 419 865-0067
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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: H & S Trucking Inc
2. The principal office address: 4522 W. Highway 40
Ocala, FL 34482
3. The mailing address (if different): 3775 Centennial Rd
Sylvania OH 43560
4. Date of incorporation/qualification: 11/01/17 Document number: P17000088607
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)
RESIGNED Jason Wincek
5762 SE Agnew Rd
Bellevue, FL 34420

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

Steven Marquis
10 Locust Course Lane
P.O. Box NOT acceptable
Ocala, FL 34472

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL

FILED

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.

Henry E. Smith

Signature of an officer or director

Henry E. Smith, President

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.

Steven Marquis

Signature of Registered Agent
Typed or Printed Name

7/22/2021

Date

If signing on behalf of an entity:

Steven Marquis

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)