Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170003117623)))



H170003117623ABC

To:				
	Division of Co	orporations		
	Fax Number	: (850)617-6380		
			1	~2
From:			≥s	2017 KOV
		: REGISTERED AGENTS INC.	- C)	
		- : T20 <del>0</del> 90000081	<b>三</b>	<b>Ö</b>
	Phone	: (307)200-2803		
	Fax Number	: (855)330-1010	က္ကုန္ျပ	28
			\frac{1}{2} - 4.	-
				。 <del>强</del>
		or this business entity to b . Enter only one email addr		_

## REGISTERED AGENT CHANGE SHORT TRAILER & OUTSOURCE CO, INC.

Certificate of Status	0
Certified Copy	()
Page Count	02
Estimated Charge	\$35.00

RARUChS

NOV 29 2017

I ALBRITTON

Electronic Filing Menu

Corporate Filing Menu

Help

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

2. The principal of SANTA ROSA, F	corporation: SHORT TRAILER & OUTS fice address: 260 FLATWOODS FOREST LC	OURCE CO, INC.	
SANTA ROSA, F		1AP	
3. The mailing add			<del></del>
J. The maning add	ress (if different): 30 WINTER ST.		
EAST ST. LOU			
4. Date of incorpor	ration/qualification: 11/22/2017	Document number: P17000093760	
5. The name and st Florida Departm	treet address of the current registered age nent of State: (If resigned, enter resigned)	ent and registered office on file with the )	
S	HORT, REBECCA		
2	60 FLATWOODS FOREST LOOP		
8	SANTA ROSA, FL 32459		
6. The name and s (if changed):	street address of the new registered agent	(if changed) and /or registered office SECRETARY 201110V 20	
F 	Registered Agents Inc.		;
	3030 N. Rocky Point Dr. STE 150A		<u> </u>
_	PO Box NOFa	oceptable	م ر
<u></u>	Tampa FL 33607		_ خ
as changed will o	e jacinical.	ddress of the business office of its registered agen	1,
Such change was authorized by the	authorized by resolution duly adopted to board, or the corporation has been not	by its board of directors or by an officer so iffed in writing of the change.	
	of an officer of director	Jon Short Mescale +	
- I burther agree to	he appointment as registered agent and o comply with the provisions of all statu ny duties, and I am familiar with and ac s document is being filed merely to refle hat the corporation has been notified in	l agree to act in this capacity, tes relative to the proper and complete scept the obligation of my position as registered at a change in the registered office address, I writing of this change.	
Psec Ham	•	11-28-2017	
Sign	ature of Registered Agent	Date	
If signing on beh	nalf of an entity:		
Bill Havre			
Ту	ped or Printed Name  * * * FILING FE	n eu- 00 ÷ • •	

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