

P1900000 5197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

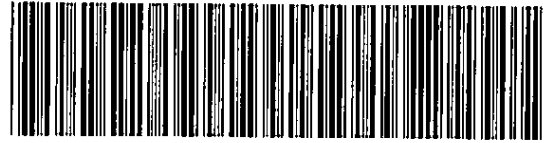
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Primary Source Logistics Inc.

Name of Corporation

DOCUMENT NUMBER: P19000005197

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:

Lucas Pinzani

Name of Contact Person

Primary Source Logistics Inc.

Firm/Company

2129 NW 86 Avenue

Address

Doral, FL 33122

City/State and Zip Code

cledo@ledolegalpro.com

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

For further information concerning this matter, please call:

Carlos Ledo, Esq.

Name of Contact Person

at ( 833 ) 533-6529

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: Primary Source Logistics Inc.

2. The principal office address: 2129 NW 86 Avenue  
Doral, FL 33122

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 01/14/2019 Document number: P19000005197

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)

Alex Marquez  
18937 SW 7 Street  
Pembroke Pines, FL 33029

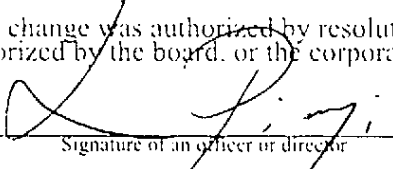
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Lucas Pinzani  
2129 NW 86 Avenue  
P.O. Box NOT acceptable  
Doral, FL 33122

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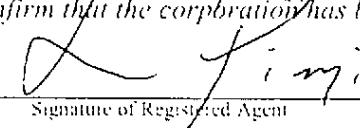
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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 of an officer or director

Lucas Pinzani Vice 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.*

  
Signature of Registered Agent

05/02/2019  
Date

If signing on behalf of an entity:

LUCAS PINZANI  
Typed or Printed Name

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