

P2100003896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

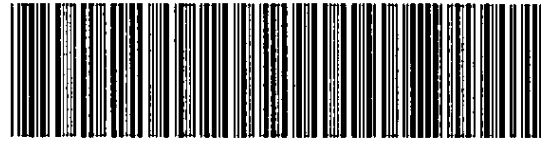
(Document Number)

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TULALIP COUNTY, WA

MAR 30 2023

D CUSHING

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Coast 2 Coast Shipping Corporation  
Name of Corporation

DOCUMENT NUMBER: P21000033896

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:

Angela H. Joe  
Name of Contact Person

Coast 2 Coast Shipping Corporation  
Firm/Company

150 Busch Drive, Unit 28543  
Address

Jacksonville, FL 32226  
City/State and Zip Code

adhjoe@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Angela Joe at ( 904 ) 613-4487  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

SECRETARY OF STATE  
TALLAHASSEE, FL

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 3, 2023

ANGELA HAWKINS JOE  
COAST 2 COAST SHIPPING CORPORATION  
150 BUSCH DRIVE, UNIT 28543  
JACKSONVILLE, FL 32226

SUBJECT: COAST 2 COAST SHIPPING CORPORATION  
Ref. Number: P21000033896

We have received your document for COAST 2 COAST SHIPPING CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

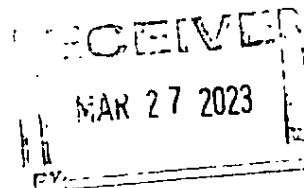
The form you submitted is for a Alien Business Organization, but your entity is a Florida Corporation. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 923A00002637



**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: Coast 2 Coast Shipping Corporation
2. The principal office address: 150 Buseh Drive, Unit 28543  
Jacksonville, FL 32226
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 04/07/21 Document number: P21000033896
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)

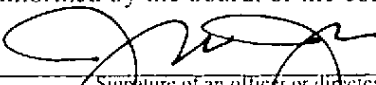
Travis Crabtree, OBO Legal Corp. Solutions, LLC  
3440 W. Hollywood Blvd., Suite 415  
Hollywood, FL 33021

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

Angela Hawkins Joe  
150 Buseh Drive, Unit 28543  
P.O. Box NOT acceptable  
Jacksonville, FL 32226

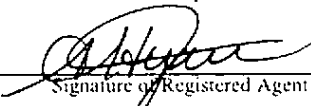
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

James E. Joe  
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

03/18/2023  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

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2023 MAR 27 AM 11:24  
SECRETARY OF STATE  
TALLAHASSEE, FL