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.

(((H23000094706 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : Y & CARRIER SERVICES INC

Account Number : 120230000041

Phone : (786)703-6704 Fax Number : (786)703-7166

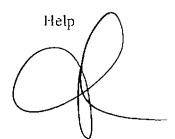
**Enter	the	email	address	for	this	busin	e55	entity	to	be	used	for	futûr
an	nual	report	: mailin	gs.	Enter	oaly	one	email	add	res:	s ple	ase.	** 54.

Email Address:	Ema	il	Addr	es	s	:
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## REGISTERED AGENT CHANGE RIVERON CARGO EXPRESS CORP

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

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To. •

H236000947663

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: RIVERON CARGO EXPRESS CORP - CHANGE OF REGISTERED AGENT Name of Corporation			
DOCUMENT NUMBER: P2300000!111			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for fil	ling.		
Please return all correspondence concerning this matter to the following:			
Osdany Riveron Vargas			
Name of Contact Person			
Riveron Cargo Express			
Firm/Company			
13569 SW 285th Ter	, :	202	
Address	•	تب عد	
Homestead, FL 33033	L,	ΛR	ارون الم
City/State and Zip Code	57 ·		,
ybcarrier@gmail.com	อา		
E-mail address: (to be used for future annual report notification)		<b>₩</b>	; U
For further information concerning this matter, please call:	<u> </u>	2023 HAR 13 AH 8:48	Y <del>e</del> 1
Osdany Riveron Vargas at (786 )525-2313			
Name of Contact Person Area Code & Daytime Telep.	hone Nun	nber	

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

CR2F045 (04/13)

HZ36000947063

Page: 3 of 3

Ta' .

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

		gistered agent, or both, in the State of Florida.
	of the corporation: RIVERON CARGO E	
2. The principa	al office address: 13569 SW 285 Ter, Ho	mestead, rL 33033
3. The mailing	g address (if different);	
4. Date of inco	orporation/qualification: 01/03/2023	Document number: 223000001111
	nd street address of the current registere eartment of State: (If resigned, enter resi	ed agent and registered office on file with the gned)
	RAIMI RIVERON LLERENA	
	13569 SW 285 TER	
	HOMESTEAD, FL 33033	
(if changed)	OSDANY RIVERON VARGAS	agent (if changed) and /or registered office 23 HAR 13
	13569 SW 285 TER	
	PO HOMESTEAD, FL 33033	Box NOT acceptable
The street add is changed wi	tress of its registered office and the strill be identical.	eet address of the business office of its registered agai,
Such change vouthorized by	was authorized by resolution duly adop the board, or the corporation has been	pted by its board of directors or by an officer so a notified in writing of the change.
J. C. Wall	nure di di other or director	Raimi Riveron Llerena - President
	•	Times of types same and the
hereby accept further agreed further agreed for the function of the further function in the further function in the further fu	of the appointment as registered agent e to comply with the provisions of all s and I am familiar with and accept the eing filed merely to reflect a change in as been notified in writing of this chan	t and agree to act in this capacity, statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this is the registered office address, I hereby confirm that the tige.
	ッ <u>-</u> 1	03/06/2023
£		Date
	Signature of Registered Agent	
	hehalf of an entity:	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)