P940006194

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## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: B & C Transporting, Inc.				
(Name of corporation)				
DOCUMENT NUMBER: P94000006194				
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:				
Carolyn Williamson				
(Name of contact person)				
B & C Transporting, Inc. (Firm/Company)				
10306 Parks Rd				
(Address)				
Utica, Ky 42376				
(City/state and zip code)				
For further information concerning this matter, please call:				
Carolyn Williamson at (270 ) 275-0249 (Name of contact person) (Area code & daytime telephone number)				
(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  Street Address: Amendment Section Division of Corporations Division of Corporations 409 E. Gaines Street				
Tallahassee, FL 32314 Tallahassee, FL 32399				

CR2E045(6/04)

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statut ange is submitted for a corporation organized under the laws of the State of ${\sf Flori}$			
	er to change its registered office or registered agent, or both, in the State of Florid			
I. The name of	the corporation: B & C Transporting, Inc.			
	office address: 10306 Parks Rd Utica, Ky 42376			
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 01/18/1994 Document number: P9400000619	<del>3</del> 4		
	d street address of the current registered agent and registered office on file with the rtment of State:	;		
	Carolyn Williamson			
	24410 Stillwell Pkwy	Z.	05	
	Bonita Spings, Fl 34135	AHA	AUG	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	ASSEF. I	25 AM	
	Robert T. Maher	STA	 5	C
	1601 Jackson Street Ste #201	JE JE	8	
	(P.O. Box NOT acceptable)			
	Ft Myers, FI 33901			
The street address changed will	ess of its registered office and the street address of the business office of its reg	istered	agent,	,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an offic he board, or the corporation has been notified in writing of the change.	er so		
Carolynatu	ure of an officer of director)  Carolya Williamso.  (Printed or typed name and time)			
I hereby accept I further agree to of my duties, an document is bein corporation has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete and I am familiar with and accept the obligation of my position as registered ageing filed merely to reflect a change in the registered office address, I hereby cois been notified in writing of this change.	e perfoi int. Or ufirm ti	rmance ; if thi hat the	e s
	8/18/05			
	gnature of Registered Agent) (Date) chalf of an entity:			
J J =	•			
(Ť	Typed or Printed Name)			

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