FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00							FILED		
CO	PROFIT RPORATION	0	FLORIDA DEPARTMENT OF STATE				Apr 28 1998 8:00am		
	UAL REPORT		Sandre B. Mortham Secretary of State				=		
	1998	EST.	DIVISION OF CORPORATIONS				Secretary of State		
DOCUMENT # P9/000016727 WATIONAL PORCEL LOGISTICS, Inc.									
	ce of Business	Mailing	Address						
6008 Benjamin M.			SOM E.				DO NOT WRITE IN THIS SPACE		
1,00444	33634						3. Date Incorporated or Qualified 36, 7		
2, Principal F	Place of Business	2a. Mai	28. Mailing Address				4. FEI Number Applie	ed For	
Suite, Apt	# AIC	26 Suit	Suite, Apt. #, etc.				60.75	pplicable	
22		27	27				5. Certificate of Status Desired Fee Requi	II	
City & Ster	te	City	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country 25	Z ₁ p		Country 30			8. This corporation owes or has paid the current year Intang Personal Property Tax due June 30. Yes N	jible	
Down of	Name and Address of Curren Mowkwia	nt Hegistered	Agent		81	Name	10. Name and Address of New Registered Agent		
4705 WEDDSTONES WOUK #107					82 Street Addre		fress (P.O. Box Number is Not Acceptable)		
LUTZ FL 33549					83				
LUIC	LC 2124.				84	City	B5 Zip Cod	le	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.15	08, Florida Statule	s the at	bove-	named corp	poration submits this statement for the purpose of changing its re	gistered	
agent. Fa	am familial with, and accept the oblig	ations of, Sec	ction 607.0505, Flo	rida Stat	tutes.	ine corpora	poration submits this statement for the purpose of changing its re- tion's board of directors. I hereby accept the appointment as regi	stered	
SIGNATURE	Signature yield or printed nume of registeric diago				d Ageni	t signature requ	red when reinstating) DATE		
12. DTLE	DONOUS MANUCKIA, PASS		DELETE	13. 1.1 Tr	TLF		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Change	ZE034 (10/97)	
NAME	4205 WESTERES WORK #10	-		1.2 NAME				28	
STREET ADDRESS CITY-ST-ZIP	mr fr 33849			1.3 STREE 1.4 CITY-		1		12EC	
TITLE			DELETE	2.1 TITLE			☐ Change ☐	Addition 5	
NAME STREET ADDRESS				2.2 NAME 2.3 STREET ADDRESS					
CITY-ST-ZIP			la consta	2.40	ITY-ST	1			
TITLE NAME			☐ DELETE	3.1 T/1 3.2 N/			☐ Change ☐	J Addition	
STREET ADDRESS						DDRESS			
CITY-ST-ZIP			DELETE	3 4. C	ITY - ST- TLE	- ZIP	Change	Addition	
NAME				4 2 N					
STREET ADDRESS CITY-ST-ZIP						DDRESS		[
TITLE			☐ DELETE	5.1 Til	TY-ST- TLE		500002505945° L -04/30/9801006012	Addition	
NAME				5 2 NAME .		DOUCCC	-04/30/9801006012 ***150.00		
STREET ADDRESS CITY-ST-ZIP				5.3 STREET ADDRESS 5.4 City-St-Zip		1	****130.00		
TITLE			☐ DELETE	6.1 TITLE &			Change	Addition	
NAME STREET ADDRESS						DORESS	Vita	>	
City-St-ZiP	partify that the information supplied w	th this filing	ines not qualify for		IY-SI-		Section 119.07(3)(i). Florida Statutes. I further certify that the info	rmation	
indicated officer or	on this annual report or supplementa director of the corporation or the rece	l annual repo iver or truste	ort is true and accu e empowered to e:	ırate and	d that	my signatu	rise shall have the same legal effect as if made under oath; that I is uire shall have the same legal effect as if made under oath; that I a uired by Chapter 607, Florida Statutes; and that my name appear	am an 📗	
Block 12	or Block 13 if changed to on an attac	chment with a	nn address.			·	ulaska a sa sa sa		
SIGNATURE: 4/22/18 813 886 4220 District Name of Signing Officer or Director									