## P9800037692

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(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)	_				
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Special Instructions to Filing Officer:	1				
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SECRETARY OF STATE
TALLAHASSEF

R.A. Change

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: JOHN W MOSLEY THOUSPUM INC.  (Name of corporation)  DOCUMENT NUMBER: P9800037692
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:
Jiha W Mosley (Name of person)
John W Mosley Transport Inc. (Name of firm/company)
5642 GEVALE HODGE RD (Address)
MACCLERNY PCA 32063 (City/state and zip code)
For further information concerning this matter, please call:
Scott ADAMS at (904) 387-1128 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

CR2E045(07/02)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

Pursuant to the p	rovisions of sections 607.0502	, 617.0502, 607.1508, or 617.1508, Florida Sta	itutes,
	• • •	ration organized under the laws of the State of	
FULLION	in order to change its regi	istered office or registered agent, or both, in the	State
of Florida.  1. The name of the	agrantian: [AHn]	W MUSLEY TRANSPORT 11	<b>\</b> (C
		_	<u>vc.</u>
2. The principal of		GEORGE HUDGE RO	
	MACCU		
3. The mailing add	lress (if different):	AMe>	
4. Date of incorpo	ration/qualification: 4/24	<b>198</b> Document number: <b>P98000</b>	037692
5. The name and s	treet address of the current regi	stered agent and registered office on file with the	
Florida Departn			
•	John WY	hosley so	2
_	1749 PARRY	RO.	
	Golen CUVE.	SPMNGS, PL. 32043	E S M
- Cho name and	_	stered agent (if changed) and /or registered off	2000年10
changed):	1	A. 1	ice (in
	John W/	Mosley	94 F
	5642 George	HUOGE RO.  I mailbox NOT acceptable)	7
	^ `` '	FA. 32063	
The street address		e street address of the business office of its regis	tered
authorized by the	board, or the corporation has b	adopted by its board of directors or by an officer been notified in writing of the change.	
(Signature of an officer, of	fairman of the board)	(Printed or typed name and title)	- OWNER
Whereby accept the	e appointment as registered as	gent and agree to act in this capacity. all statutes relative to the proper and complete	DiReci
performance of m	y duties, and I am familiar wit Or, if this document is being t	h and accept the obligation of my position as filed merely to reflect a change in the registered ation has been notified in writing of this change	•
office address, I h	ereby confirm that the corpora	ation has been notified in writing of this change	
John 1	W. Mesky	10-19-02	<del>_</del>
If signing on behalf o	ature of Registered Agent)	(Date)	
ii digning on ochan o	i an omny.		
(Тур	ed or Printed Name)	(Capacity)	<del>-</del>