P98000082441

· (Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #	¥)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)	<u> </u>
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SECRETARY OF STATE STATE OF STATE OF CORPORATIONS

R.A.

APR - 3 2013

T. BROWN

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Sunshine Truck Service, Duc. Name of Corporation			
DOCUMENT NUMBER: P98000082441			
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:			
5/11/2 May (C) V(1)			
Name of Contact Person			
Sample To to Comment			
Schone Truck Service, Due.			
Time Company			
2104 North 34th ST. Address			
Address			
Tempa FC 33605 City/Slate and Zip Code			
City/Slate and Zip Code			
E-mail address: (to be used for future annual report notification)			
Es main address. (to be used for fature aimain report normeacion)			
For further information concerning this matter, please call:			
Aug. may 1/2 0017			
Name of Contact Person at (813) 765-0017 Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Street Address:			
Amendment Section Amendment Section Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building			
Tallahassee, FL 32314 2661 Executive Center Circle			
Tallahassee, FL 32301			

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

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: SUNSHINE Truck Service. Sucar porato.
2. The principal office address: 2104 North 34th ST.
Tampa FL 33605
3. The mailing address (if different):
4. Date of incorporation/qualification: 09/11/98 Document number: P9800082441
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)
Oat D. Vu
2104 North 34th ST. 2 VSE
2104 NORTH 34H ST: Tampa FL 33605 Tampa FL 33605
o. The name and street address of the new registered agent (if changed) and for registered office (if changed):
JIMMY Q, VU
2104 North 34H ST. P.O. Box NOT acceptable
P.O. Box NOT acceptable
Tampa Fl 33605
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.
Signifyer of an officer or director Printed of typed name and fitte
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.
x / 3/21/13
If signing on behalf of an entity:
Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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