## P99000068378

POI	gistics, Inc. Box 4012 d, FL 32772	
(Ad	dress)	****
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number	)
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SECRETARY OF STATE

APPROVED AND EILED

R.A. Chong

C. Coulliette 351 3 1 2007

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes	s, this
statement of change is submitted for a corporation organized under the laws of the State of $\_$	1orida
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: YLM Trucking, Inc.	
2. The principal office address: 135 COUNTRY CLOB. Cir.	
Sanford FL 32771'	
3. The mailing address (if different): P.O. Bx 4012	
Sanford, FL 32772	
4. Date of incorporation/qualification: 7/26/99 Document number: P9900	006837
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
125 Coontra Club Piche	
Soofad Proportion	
<u> </u>	
Marlone Sullivan	07 . SEC
6. The name and street address of the new registered agent (if changed) and /or registered office	JUL 25 CRETARY LAHASSE
(if changed):	25 IARY ASSE
Phillip Hall	Y P
125 Caxolor Club Circle	517 1.817 1.817
(P.O. Box NOT acceptable)	
<u>Santord, Fl. 32771</u>	3>
The street address of its registered office and the street address of the business office of its registered will be identical.	stered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an office authorized by the board, or the corporation has been notified in writing of the change.	er so
Marleyo Sullines Marlop Sullivar	)
(Signature of an officer or director) (Pinted or typed name and little)	<del></del>
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 of my duties, and I am familiar with and accept the obligation of my position as registered ager document is being filed merely to reflect a change in the registered office address, I hereby con corporation has been pointified in writing of this change.	performance n. Or, if this firm that the
D. J. J. J01	
(Date)	<del></del>
if signing on behalf of an entity:	
Phillip HALL	
Crush a Disk 1 Mars	

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

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8 05)

APPROVE AND