I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.				
SIGNATURE: JASON VARGAS	CFO	05/01/2020		

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Α

Authorized Person(s) Detail :					
Title	CEO	Title	CFO		
Name	VARGAS, HANNAH R	Name	VARGAS, JASON		
Address	3300 CLOVERPLACE DR	Address	209 MEADOW LANE		
City-State-Zip:	PALM HARBOR FL 34684	City-State-Zip:	OLDSMAR FL 34677		

The

TAMPA, FL 3363	5 US			
The above named e	ntity submits this statement for the purpose of changing its regis	tered office or regis	ered agent, or both, in the State of Flo	rida.
SIGNATURE:	JUDITH DELGADO			05/01/2020
	Electronic Signature of Registered Agent			Date
Authorized Pe	erson(s) Detail :			
T '11-		Title	050	

DOCUMENT# L15000131318

Entity Name: SOLOMON GLOBAL LOGISTICS, LLC

Current Principal Place of Business:

3300 CLOVERPLACE DR PALM HARBOR, FL 34684

Current Mailing Address:

PO BOX 2279 OLDSMAR, FL 34677 US

FEI Number: 47-4701152

Name and Address of Current Registered Agent:

2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DELGADO, JUDITH 8307 SOLANO BAY LOOP # 1617 TAN

FILED May 01, 2020 Secretary of State 6808120915CR

Certificate of Status Desired: Yes

Date

Electronic Signature of Signing Authorized Person(s) Detail