F94000003277



ACCOUNT NO.

072100000032

REFERENCE

614081

4713802

AUTHORIZATION :

COST LIMIT

\$ 35.00

ORDER DATE: March 6, 2000

ORDER TIME :

9:43 AM

800003168918--7

ORDER NO. : 614081-065

CUSTOMER NO: 4713802

CUSTOMER: Kerri Tareta, Corp Analyst

Trimac Corporation

2100, 800 Fifth Avenue S.w.

Calgary, alberta, AB T2P 2P9

CHANGE OF AGENT

NAME:

DSI TRANSPORTS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom

GOODLEETE MAR # 4 200

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

	ed corporation organized under the llowing statement in order to chan	*	
the State of Flo	orida.		
1. The name of	of the corporation is: DSI TRANSPOR	RTS, INC.	
2. The mailing	g address of the corporation is:		
3. Date of ince	orporation/qualification: June 22,	1994 Document nur	mber: <u>F9400003277</u>
4. The name a	and address of the current registered	agent and office:	
	CT Corporation System		00 1 SECR TALL
	1200 South Pine Island Road		
	Plantation, FL 33324		SSER F E
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)			
	Corporation Service Company		Acceptable) F STATE SS
	1201 Hays Street		<u> </u>
	Tallahassee, Florida 32301		<u> </u>
The street add agent, as change	ress of its registered office and the ged, will be identical.	e street address of the business	ss office of its registered
Such change vauthorized by	was authorized by resolution duly a	adopted by its board of direct	ors or by an officer so
	Alleny		March 3 , 2000
(Signatu	ure of an officer, chairman or vide chairman of	f the board)	(Date)
	Robert J. Kennedy		
	(Printed or typed name and title)		•
corporation, I I further agree	amed as registered agent and to acc hereby accept the appointment as re to comply with the provisions of al f my duties, and I am familiar with a nt.	egistered agent and agree to a l statutes relative to the proper	ct in this capacity. r and complete
By: Cole	of Where	3/13/00	
	(Signature of Registered Agent)	(Date)	
If signing on behal	f of an entity:		
Carol K. Dolo	or, Asst. Vice President		
(Typed or Printed Name)		(Сар	pacity)
* * * FILING FEE: \$35.00 * * *			

CR2EO45(7/97)