Electronic Filing Cover Sheet

Public Access System

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092 Fax Number : (850)878-5368

REGISTERED AGENT CHANGE

TRIMAC TRANSPORTATION SOUTH INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

Pursuant to the provisions of sections 607.05 statement of change is submitted for a corporin order to change its registered offi	ration organiz	ed under the laws of the State	of Virginia
1. The name of the corporation: Trimac Trans	-	=	•
2. The principal office address: 15333 JFK BLVD. 800 HOUSTON TX 770			
3. The mailing address (if different): C/O LEGAL DEPT 1700, 800 - 5TH AVI	E SW CALGA		
4. Date of incorporation/qualification:	06/22/1994	Document number:	F94000003277
5. The name and street address of the current Florida Department of State: (If resigned, of			o with the
CORPORATION SERVICE	COMPANY		. 0
1201 HAYS STREET TALL	AHASSEE/FI	J32301	09 SEP 22
6. The name and street address of the new reg (if changed):	gistered agent	(if changed) and /or registered	
C T Corporation System	· · · · · · · · · · · · · · · · · · ·		
c/o C T Corporation System,	1200 South Pi	ne Island Road	•
	P.O. Box NOT	accolmple .	
Plantation, Florida 33324			
The street address of its registered office ar as changed will be identical.	nd the street a	ddress of the business office	of its registered agent,
Such change was authorized by resolution authorized by the board, or the corporation	duly adopted has been not	by its board of directors or b fied in writing of the change	y an officer so
		Jennifer Shanders	-Secretary
Signature of an officer of director		Printed or typed name	
I hereby accept the appointment as register I further agree to comply with the provision of my duties, and I am familiar with and accument is being filed merely to reflect a corporation has been notified in writing of	red agent and ns of all statu ccept the oblig change in the this change.	agree to act in this capacity les relative to the proper and action of my position as regis registered office address, I i	l complete performance stered agent. Or, if this hereby confirm that the
By: CT Corporation System		09/21/09	
Signature of Registered Agent		Date	
If signing on behalf of an entity:			
Kristine Heiberger			
Assistant Secretary	filing fe	E: \$35.00 * * *	
MAKE CHECKS PAY MAIL TO: DIVISION OF CORPO	ABLE TO FLO	rida Department of Stat D. Box 6327, Tallahassee	E , FL 32314

CR2E045 (8/05)
FL006 - 07/23/1009 C T System Online