811386

THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 311116 4703877

AUTHORIZATION : Patricia Pigott

COST LIMIT : $ 35.00

ORDER DATE : March 27, 1997

ORDER TIME : 10:13 AM

ORDER NO. : 311116-020

CUSTOMER NO: 4703877

300002130443--8

CUSTOMER: Ms. Jane Milam
Crowley Maritime Corporation
155 Grand Avenue

Oakland, CA 94612

FILED
97 APR -1 PM 2:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

CHANGE OF AGENT

NAME: CROWLEY AMERICAN TRANSPORT, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY

CONTACT PERSON: Paula K. Kendrick

4/1

RECEIVED
97 APR -1 PM 1:
DIVISION OF CORPORATIONS

Florida Department of State, Jim Smith, Secretary of State

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, the undersigned corporation organized under the laws of the State of DELAWARE submits the following statement in order to change its registered office or registered agent, or both, in the State Florida.

FILED
97 APR -1 PM 2:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

1a. The name of the corporation is: CROWLEY AMERICAN TRANSPORT, INC.

1b. Date of incorporation: 10-23-56 Document number

2. The name and address of the current registered agent and office:

C T CORPORATION SYSTEM

1200 SO. PINE ISLAND DRIVE PLANTATION FL 33324

3. The name and address of the new registered agent and office:
(P.O. Box Not Acceptable)

CORPORATION SERVICE COMPANY

1201 Hays Street, Tallahassee, Florida 32301

The street address of its registered agent 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.

Tana Shipman
SIGNATURE

TANA G. SHIPMAN
SECRETARY
Typed or printed name and title

MAR 25 1997
DATE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

CORPORATION SERVICE COMPANY
VICKI SCHREIBER

SIGNATURE By: Vicki Schreiber

ASST VICE PRESIDENT

DATE 3/31/97

DEBIT MEMORANDUM

FOR OFFICIAL USE

DATE NUMBER

816455.00

TO :
DEPARTMENT OF STATE

STATE OF FLORIDA
OFFICE OF STATE TREASURER
TALLAHASSEE, FLORIDA

FUND	AMOUNT	REASON RETURNED	KEY #	
GENERAL REVENUE	0.00	INSUFFICIENT FUNDS	1	
TRUST	1,356.25	ACCOUNT CLOSED	2	2
OTHER		UNCOLLECTED FUNDS	3	
TOTAL	1,356.25	OTHER	4	

CROSS REF	DISTRIBUTION SAMAS CODE	REASON	AMOUNT
12	45-20-2-130001-45300000-00-000100-00	4	8.75
12	45-20-2-130001-45300000-00-000100-00	4	122.50
12	45-20-2-130001-45300000-00-000100-00	1	122.50
12	45-20-2-130001-45300000-00-000100-00	1	122.50
12	45-20-2-130001-45300000-00-000100-00	1	131.25
12	45-20-2-130001-45300000-00-000100-00	4	848.75

GRAND TOTAL: $ 1,356.25

848.75
42.44
72888 - F

60000213721C--8
-04/09/97--1005--001
****891.19 ****891.19

RECEIVED
97 MAR -6 PM 3:33
BUREAU OF FINANCIAL MANAGEMENT

Process Date: 02/14/97

The above named fund(s) has been reduced by the amount of this check(s) under authority of Section 215.34, F.S.

State Treasurer