Division of Corporations

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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for fur annual report mailings. Enter only one email address please.

Email	Address:		

REGISTERED AGENT CHANGE GLOBAL CONTAINER LINE INTERNATIONAL, INC.

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S. TALLENT

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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, this statement of change is submitted for a corporation organized under the laws of the State of Washington in order to change its registered office or registered agent, or both, in the State of Filorida. I. The name of the corporation: GLOBAL CONTAINER LINE INTERNATIONAL, INC. 2. The principal office address: 7400 45th Street Ct. E, Fife, WA 98424 3. The mailing address (if different):_ Document number: F05000001485 4. Date of incorporation/qualification: __03/09/2005 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) NRALSERVICES, INC. 1200 S PINE ISLAND RD PLANTATION, PL 33324 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): C T Corporation System c/o C T Corporation System, 1200 South Pine Island Road P.O. Box NOT acceptable Plantation, Florida 33324 The street address of its registered office 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, or the corporation has been notified in writing of the change. Kevin Kelly, CEO OVER CON Printed or typed name and title 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 familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. C T Corporation System Signature of Registered Agent If signing on behalf of an entity: Madonna Cuddihy Special Assistant Secretary Typed or Printed Name * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEB, FL 32314
CR2E045 (03/12)