

F11000001966

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

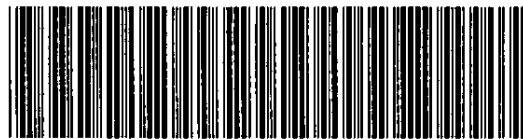
(Business Entity Name)

(Document Number)

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RA Change

08-30-12

DC

ULRICH & VIDRA, LLC

Attorneys-at-Law

JERRY L. ULRICH
LESLIE E. VIDRA
115 EAST SPRING STREET
SUITE 100 ELSBY BUILDING
NEW ALBANY, INDIANA 47150

(812) 945-2800
(FAX) (812) 945-2818
julrich@u-vlaw.com
lvidra@u-vlaw.com

August 22, 2012

VIA CERTIFIED MAIL
NO. 7010 2780 0002 0070 0990

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: HMS Global Maritime, Inc.
Hornblower Marine Services-Florida, Inc.

Dear Sir or Madam:

Enclosed is an original and one copy of a Cover Letter and Statement of Change of Registered Office or Registered Agent or Both For Corporations form for each of the above named corporations, along with a check made payable to your office in the amount of \$70.00 for each \$35.00 filing fee. Please file said Statements of Change and return a file-stamped copy to me for our records in the enclosed stamped self-addressed envelope.

Please contact me directly at (812) 945-2800 if you have any questions in this regard, or if you require anything further to process this request.

Thank you in advance for your attention to this matter.

Very truly yours,

ULRICH & VIDRA, LLC



Janet L. Nall
Paralegal

JLN:gk
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HMS Global Maritime, Inc.
Name of Corporation

DOCUMENT NUMBER: F11000001966

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Janet L. Nall, Paralegal

Name of Contact Person

Ulrich & Vidra, LLC

Firm/Company

115 E. Spring Street, Suite 100

Address

New Albany, IN 47150

City/State and Zip Code

jnall@u-vlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Janet L. Nall, Paralegal

Name of Contact Person

at (812) 945-2800

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 Delaware
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: HMS Global Maritime, Inc.
2. The principal office address: 115 E. Market Street, New Albany, IN 47150
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/10/2011 Document number: F11000001966
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)

Fred Berley, resigned

4610 Ocean Street

Mayport, FL 32233

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

John M. Keever

1850 SE 17th Street, Suite 300

P.O. Box NOT acceptable

Fort Lauderdale, FL 33316

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.

X John M. Keever John M. Keever, Vice President
Signature of an officer or director 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 I am 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.

X John M. Keever 7/24/12
Signature of Registered Agent Date

If signing on behalf of an entity:

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, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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12 AUG 27 PM 12:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA