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AND SEEL FLORID





FILING REQUEST

February 3, 2006

FLORIDA SECRETARY OF STATE

Type of Filing:

CHANGE OF AGENT

Subject(s):

SMITHWAY MOTOR XPRESS, INC.

Form(s) Enclosed:

STATEMENT OF CHANGE OF REGISTERED OFFICE / AGENT

Supporting Document(s):

NONE

Check Enclosed:

YES - CHECK# 21758 FOR \$35.00

Return Via:

REGULAR MAIL - SASE ATTACHED

Filing Method:

UPON RECEIPT

PLEASE RETURN TO:

PREMIER CORPORATE SERVICES, INC.

590 PARK STREET, SUITE 6

ST. PAUL, MN 55103

Please call me at 1-800-227-1256 if there are any questions.

Thank you!

Melissa Hobbs

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

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change is submit	provisions of sections 607.0502, 617.0502, tted for a corporation organized under the istered office or registered agent, or both,	laws of the State of Iowa	s, this statement of in order
1. The name of the	he corporation: Smithway Motor Xpress	s, Inc.	
2. The principal	office address: 2031 Quail Avenue, Fort	Dodge IA 50501	
3. The mailing a	ddress (if different): P.O. Box 404, Fort	Dodge, IA 50501	
4. Date of incorp	oration/qualification: 1/04/1995	Document number: F9500000002	9
	street address of the current registered age tment of State:	ent and registered office on file with the	
	Marvin I. Moss		
	20801 Biscayne Blvd, Suite 506		
	North Miami Beach, FL 33180		FEB - 7
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			-7 MII: 26 ARY OF STATI
	NRAI Services, Inc.		— 081E
	2731 Executive Park Drive, Suite 4	71 NOT	_
	(P.O. Box or personal ma	ulbox NOT acceptable)	
changed will be			
Such change wa	s authorized by resolution duly adopted corporation has been notified in writing	by its board of directors or by an office of the change.	er so authorized by
Meliss	a Hobba	Melissa Hobbs, Assistant Se	
I hereby accept I further agree t duties, and I am being filed mere been notified in NRAI Services by:	the appointment as registered agent and o comply with the provisions of all status familiar with and accept the obligation by to reflect a change in the registered of writing of this change. (Signature of Registered Agent)	agree to act in this capacity, tes relative to the proper and complete of my position as registered agent. Or flice address, I hereby confirm that the	-
Jackie Sorman	ı	Assistant Secretary	
	(Typed or Printed Name)	(Canacity)	

* * * FILING FEE: \$35.00 * * *