## F95000005148

(Re	questor's Name)	
(Ad	dress)	
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CORPORATION SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE :

AUTHORIZATION (

COST LIMIT

ORDER DATE: August 27, 2012

ORDER TIME : 12:39 PM

ORDER NO. : 325727-015

CUSTOMER NO: 5051669

## CHANGE OF AGENT

NAME: SUPERIOR CARRIERS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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

statement of change is submitted for a corporation organized under the laws of the State of Virginia  in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: SUPERIOR CARRIERS, INC.	
2. The principal office address:	
711 Jorie Blvd., Suite 101N, Oakbrook, IL 60523	_
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/23/1995 Document number: F95000005148	
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)	
C T Corporation System	
1200 South Pine Island Road	å
Plantation, FL 33324	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	ココ
Corporation Service Company	
1201 Hays Street	
P.O. Box NOT acceptable	
Tallahassee, FL 32301	
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.	
Sugnature of an officer or director  Maureen Cathell, Vice President  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.  Corporation Service Company	
By: Signature of Registered Agent S-24-12 Date	
If signing on behalf of an entity:	
Grace E. Kirby, Asst. V.P.  Typed or Printed Name	
••	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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