

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M02000000139

Entity Name: AES OCEAN EXPRESS LLC

**FILED**  
**Mar 11, 2013**  
**Secretary of State**

**Current Principal Place of Business:**

4300 WILSON BLVD  
ARLINGTON, VA 22203

**New Principal Place of Business:**

**Current Mailing Address:**

4300 WILSON BLVD  
ARLINGTON, VA 22203

**New Mailing Address:**

FEI Number: 41-2038615

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HEATHER SAVAGE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: CHATLOSH, BRIAN  
Address: 4300 WILSON BLVD  
City-St-Zip: ARLINGTON, VA 22203

Title: V  
Name: CAHILL, EDWARD  
Address: 4300 WILSON BLVD  
City-St-Zip: ARLINGTON, VA 22203

Title: T  
Name: HIRSH, LAWRENCE  
Address: 4300 WILSON BLVD  
City-St-Zip: ARLINGTON, VA 22203

Title: S  
Name: CAMPBELL, MEGAN  
Address: 4300 WILSON BLVD  
City-St-Zip: ARLINGTON, VA 22203

Title: AS  
Name: MANN, LEITH  
Address: 4300 WILSON BLVD  
City-St-Zip: ARLINGTON, VA 22203

Title: D  
Name: FROST, JODI  
Address: 4300 WILSON BLVD  
City-St-Zip: ARLINGTON, VA 22203

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MEGAN CAMPBELL

S

03/11/2013

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date