M09000002666

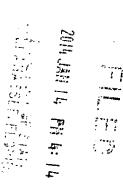
(R	equestor's Name)			
(A	ddress)			
(A	ddress)			
(C	ity/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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Office Use Only



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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

1

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Alex Smetana

Date: January 10, 2014

Order#: 954168-006

Re: WESTWAY TERMINAL COMPANY LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Alex Smetana

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

#

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

,		
1. Name of the limited liability company: WESTWAY TE	ERMINAL COMPANY LLC	
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 365 Canal Street, Suite 29 New Orleans LA 70130	00
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	365 Canal Street, Suite 29 New Orleans LA 70130	*****
07/09/2009	M09000002666	2014
3. Date of filing/registration in Florida	4. Document number	The same of the sa
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida l	
Registered Agent:	CT Corporation System	-
Registered Office Address:	1200 South Pine Island Ro Plantation FL 33324	pad Tie F
NEW Registered Agent:	Corporation Service Comp	pany
(b) Enter name of NEW Registered Agent and/or N		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		22204
	Tallahassee	_{,FL} 32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the entical. Or, in the case of a F (s) was/were authorized by a wise provided in the articles	registered office Florida limited In affirmative vote of
·		
Dona Priebe, Authorized Person		
Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my Chapter 605, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability composition. By:	l agree to act in this capacity proper and complete perforn position as registered agent nerely reflect a change in th any has been notified in writ	y. I further agree to nance of my duties, as provided for in e registered office ing of this change.
Signature of Registered Agent Corporation Service Company	Grace E Kirby, Asst VP	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00