## P02000091980

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Davis of the March)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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R-A Charge C.COULLIETTE

NOV 18 2009

**EXAMINER** 

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT:	Change of Resident	Agent				
GCDGLC1.	Change of Resident Name of Corpora	ntion				
DOCUMENT NUMBER:	P070000	91980				
The enclosed Statement of Cha	inge of Registered Office/Ager	nt and fee are submitt	ed for filing.			
Please return all correspondence	e concerning this matter to the	e following:				
Ali Kain						
	Name of Contact P	erson				
ODEOLALIZED OVEDOEAG OLUBBING ING						
SPECIALIZED OVERSEAS SHIPPING INC Firm/Company						
	,	•				
6425 TIREMAN ST,						
Address						
City/State and Zip Code						
City/State and Zip Code						
-	KAINALI@AOL.C		<del></del>			
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
ALI KA	AIN at (	313	279-0331			
Name of Contact	ot Person	Area Code & Daytin	279-0331 ne Telephone Number			
Enclosed is a \$35.00 check ma						
Entroduct is a 555.00 proper rec	so payable to the Department	or state.				
Mailin	ng Address:	Street Address:				
Amendment Section		Amendment Section				
	on of Corporations	Division of Cor	•			
	Box 6327	Clifton Building	-			
Tallah	nassee, FL 32314	2661 Executive				
		Tallahassee, FL	, 3 <b>23</b> 01			

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

statement of ch	ange is submitted for a co	orporation organized	507.1508, or 617.1508, Flo d under the laws of the Sta d agent, or both, in the Sta	te of FLORID	
1. The name of	the corporation: SPEC	CIALIZED OVE	ERSEAS SHIPPIN	IG INCORP	ORATED
2. The principa	office address: 2401 N 33142	IW 34 AVE			
3. The mailing	address (if different): 64	25 TIREMAN S	T, DETROIT MI 4820	4	
4. Date of incor	poration/qualification:	08/15/2007	Document number:	P070000	91980
	d street address of the current of State: (If resign		t and registered office on f	file with the	
	4455 NW 102 PLA	ICE K			
	DORAL FL 33178			1	
	PENA-HAMEL, VI	CENTE J			
6. The name an (if changed):	d street address of the ne	w registered agent (i	f changed) and /or register	ed office	
A	4455 NW 102 PLA	(CE			2 131
	<b>DORAL FL 33178</b>	P.O. Box NOT acc	centable		元 23
	- ALI KAIN (CHANG				
The street addr as changed wil	ess of its registered office be identical.	ce and the street add	dress of the business offic	e of its registere	d agent,
Such change wathorized by t	as authorized by resolut he board, or the corpora	ion duly adopted by tion has been notifi	y its board of directors or ed in writing of the chang	by an officer so	
Signati	re of an officer or director	· · · · · · · · · · · · · · · · · · ·	ALI KA	AIN ne and title	
I further agree of my duties, ai document is be	t the appointment as reg to comply with the prov nd I am familiar with an ing filed merely to refle s been notified in writin	isions of all statute: d accept the obliga ct a change in the re	gree to act in this capacit s relative to the proper an tion of my position as reg egistered office address, I	ty. id complete perj istered agent. ( hereby confirm	formance Or, if this that the
			11/10/	/09	
	ehalf of an entity:		Date		
Ī	yped or Printed Name				

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