

Division of Corporations

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PD8000099947

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

RECEIVED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 AUG -5 AM 10:39

FILED

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

REGISTERED AGENT CHANGE
SHIP MANAGEMENT SERVICES INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

C. LEWIS

AUG - 6 2013

EXAMINER

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SHIP MANAGEMENT SERVICES INC.

Name of Corporation

DOCUMENT NUMBER: P08000099947

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Yescenia Barnfield

Name of Contact Person

Ravenscroft Shipping, Inc.

Firm/Company

3251 Ponce de Leon Blvd.

Address

Coral Gables, FL 33134

City/State and Zip Code

ybarfield@Ravenship.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Yescenia Barnfield

305

507-2000

Name of Contact Person

at (

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2B043 (03/12)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.


1. The name of the corporation: SHIP MANAGEMENT SERVICES INC.
2. The principal office address: 3251 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134
3. The mailing address (if different): _____
4. Date of incorporation/qualification: _____ Document number: P08000098947
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)
HOSKINSON, LEONARD J
3251 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
Plantation, Florida 33324
P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

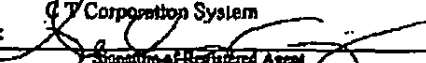
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

YESENIA E. BARNFIELD - SECRETARY

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, 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.

C T Corporation System
By: 
Signature of Registered Agent

8/5/13
Date

If signing on behalf of an entity:

Angel Nunez
Assistant Secretary
Typed or Printed Name

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

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

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