

Reinstatement

UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue Tallahassee, Florida 32301 (850) 681-6528

HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY

Pa7266 CORPORATION NAME (S) AND

October 17, 2002

C. Coullistie DCT 1 8 2002

		CORPORATION NAME (S) AND DOCUMENT NUMBER (S):			
Lating, register, page, age, ag	one. The second second	Alliance Shippers Inc.			7. 2
					200
Filing Evidence ☑ Plain/Confirmation Copy				Type of Docum ☐ Certificate of St	
□ Cer	tified Copy			□ Certificate of G	ood Standing
		v		□ Articles Only	
□ Pho	trieval Reque tocopy	<u>est</u>		Articles & Ame □ Fictitious Name	e Certificate
□ Cer	tified Copy			□ Other 5000 -1 *	084426158 0/18/02-01021006 *****35.00 *****35.00
NEW F	TLINGS		AMENDMENTS	.,	802 08 1800 N.E.
Profit			Amendment		
Non Pr	ofit		Resignation of RA	Officer/Director	CEIVED
Limited	Liability	X	Change of Registe	red Agent	SIA G
Domes	tication		Dissolution/Withd	rawal	TONE 37
Other			Merger		
					_
OTHE	RFILINGS		REGISTRATION	QUALIFICATION	-
Annual	Reports		Foreign		
Fictition	us Name		Limited Liability		
Name F	Reservation		Reinstatement		

Trademark

Other

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

Pursuant to the this statement of New Jersey	change is submitted for a co	0502, 617.0502, 607.1508, or 617.1508, F orporation organized under the laws of the t registered office or registered agent, or b	State of
<i>of Florida</i> . 1. The name of	the corporation: ALLIANCE S	BHIPPERS, INC.	17 19 19 19 19 19 19 19 19 19 19 19 19 19
2. The principal	office address: 516 SYLVAN	N AVENUE, ENGLEWOOD CLIFFS, NJ 07632	OC 18
3. The mailing a	address (if different):		AN III
4. Date of incor	poration/qualification: 12/0	08/89 Document number: P2	7266
5. The name and		registered agent and registered office on fil	le with the
	4991 SE MARINER VILLAG	E LANE	
	STUART, FL 34997		
6. The name as changed):	nd street address of the new	registered agent (if changed) and /or registered longer registered agent (if changed) and /or registered registered agent (if changed) and /or registered registered agent (if changed) and /or registered agent (if changed) agent (if changed) and /or registered agent (if changed)	istered office (if
'	526 E PARK AVENUE		_
	(P.O. Box or p TALLAHASSEE, FL 32301	personal mailbox NOT acceptable)	_
agent, as chang	ed will be identical.	nd the street address of the business office	
Such change we authorized by t	as authorized by resolution of board of the corporation	thuly adopted by its board of directors or by has been notified in writing of the change.	
	r, chairman or vice chairman of the board	(Printed or typed name and title)	
I hereby accept I further agree performance of registered ager office address,	t the appointment as register to comply with the provision my duties, and I am familia it. Or, if this document is be I hereby confirm that the co	red agent and agree to act in this capacity, ns of all statutes relative to the proper and ir with and accept the obligation of my pos- sing filed merely to reflect a change in the rporation has been notified in writing of the rporation has been notified in writing of the pro-	complete vition as registered his change.
Ed K	and	10/7/0×	
If signing on beha	Signature of Registered Agent)	(Daily	
ED HAND	u v. m omaj.	PRESIDENT	
	Typed or Printed Name)	(Capacity)	
	* * * ****	ING FEE: \$35.00 * * *	

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

Make checks payable to Florida Department of State and Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314