## P940000080449

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	<u>.</u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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DIVISION OF CORPORATIONS

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## **COVER** LETTER

Division of Corporations
SUBJECT: Access USA Shipping Inc (Name of Corporation)
DOCUMENT NUMBER: P960000 80449
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:
(Name of Contact Person)
(Firm/Company)
10084 Cherry Hills AUE
Bradenton FL 34202 (City/State and Zip Code)
For further information concerning this matter, please call:
MECISSA A SEED at (941) 538-6167- (Name of Contact Person) at (941) 638-6167- (Area Code & Daytime Telephone Number)
(Name of Contact Person) (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

TO:

Amendment Section



December 16, 2008

ERIC BAIRD 10084 CHERRY HILLS AVE BRADENTON, FL 34202

SUBJECT: ACCESS USA SHIPPING, INC.

Ref. Number: P96000080449

We have received your document for ACCESS USA SHIPPING, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 508A00060586

SECRETARY OF STATE TALL AND A

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BECEINED

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

Pursuant to the pastatement of chan in order	ge is submitted fo		organized unde	r the laws o	f the State of		s 
<ol> <li>The name of th</li> <li>The principal of</li> </ol>	• —	Access 1899	USF 60th	7 SA Place	ripping	Jhc	
3. The mailing ad	dress (if differen	Braden 1):	ten	4	342	03	
4. Date of incorpo	pration/qualificat	ion: 9/27/	96 Dag	ument num	her P9	60000	80449
5. The name and	street address of		red agent and r				
	DAU		Sas			<del></del>	
-	189	9 604	L PlA		ast	_	V Vid
	Bro	rdenten	FL		4203	_	VISION OF COL
6. The name and (if changed):				ged) and /or	registered of	fice	-5 F
-		84 Ch	DAIRD	1.1 : 11 c	<u> </u>		CORPORATIONS 5 PM 3: 22
		(P.O. Box NOT accordent	1	k K	3.420	<u></u>	DNS 22
The street address as changed will be	s of its registere be identical.	d office and the s	street address o	of the busine	ess office of	ts registere	d agent,
Such change was authorized by the	authorized by reboard, or the co	esolution duly ac orporation has be	lopted by its been notified in v	oard of dire writing of tl	ctors or by an	n officer so	
Signatur (Signatur	e of an officer or direc	and tor)	<u>_</u>	ALL Bus	or typed name and	cretary	
I hereby accept t I further agree to of my duties, and document is bein corporation has	he appointment o comply with the I am familiar w g filed merely to been notified in	as registered age e provisions of al ith and accept th reflect a change writing of this ch					
(Sigr	on a constant of Registered A	gent)		12.29	, 08 (Date)		
If signing on beh	alf of an entity:						
ERIC Ba	rped or Printed Name)						

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