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JUN 30 2015 R. VVITTE

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Raven Transport Holding Inc.		
DOCUMENT NUMBER: P9800089433		
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:		
Sandy Kelley Name of Contact Person		
Florida East Coast Railway UC		
7411 Fullerton Street, Ste 300		
Jacksonville FL 32256 City/State and Zip Code		
Sandy. Kelley (a) fecture, com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Sandy Kelley at (904) 538 6091. Name of Contact Person. at (904) 538 6091. 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

CR2E045 (03/12)

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida.
in orde	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Raven Transport Holding Inc
2. The principal	office address: 6800 Broadway Ave
	Jacksonville, FL 32254
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 10-20-98 Document number: P98000894
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Raven Transport Co. Inc. 2
	6800 Broadway Ave
,	Jacksonville FL 32254
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	C T Corporation System
-	c/o C T Corporation System, 1200 South Pine Island Road
	P.O. Box NOT acceptable Plantation, Florida 33324
The street address as changed will be	s of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
Signature	Printed or typed name and title
I hereby accept ti I further agrée to performance of n agent. Or, if this hereby confirm th	he appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete ty duties, and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address, I tat the comporation has been notified in writing of this change.
By: \ Nos	bration System 6-19-2015 brie of Registered Agent Date
If signing on beha • Mad e	alf of an entity:
эресіаі А Турі	ssistant Secretary ed or Printed Name

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

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

CR2E045 (03/12)