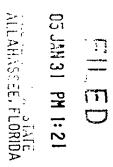
## 142843

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## **COVER LETTER**

TO: Amendment Section Division of Corporations				
•				
SUBJECT: Semco Maritime, Inc., a Florida Corporation				
(Name of corporation)				
DOCUMENT NUMBER: V42843				
The enclosed Statement of Change of Registered Office/Agent and fee are su	ibmitted for filing.			
Please return all correspondence concerning this matter to the following:				
Finn Martensen				
(Name of contact person)				
Martensen Wright, LLP				
(Firm/Company)				
112 J Street, 2nd Floor				
(Address)				
Sacramento, CA 95814				
(City/state and zip code)				
For further information concerning this matter, please call:				
Finn Martensen at (915)	48-9088			
(Name of contact person) (Area code & d	48-9088 aytime 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 Division of Opporations Division of Opporations Amendment Division of Opporations Tallahassee, FL 32314  Street Address: Amendment Tallahassee, Tallahassee	: Section Corporations es Street			

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

statement of ch	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stat ange is submitted for a corporation organized under the laws of the State of Florier to change its registered office or registered agent, or both, in the State of Florier to change its registered office or registered agent, or both, in the State of Florier to change its registered office or registered agent, or both, in the State of Florier to change its registered office or registered agent, or both, in the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of Florier to change its registered of the State of State	rida	·——	
1. The name of	the corporation: Semco Maritime, Inc.			
2. The principal	office address: 112 J Street, Second Floor, Sacramento, CA 95814			
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: June 11, 1992 Document number: V42843			
	d street address of the current registered agent and registered office on file with the trument of State:	he		
	Jose E. Latour	ALI	05	
1101 Brickell Ave, Suite 902		ÄH	JAN 3	1
	Miami, FL 33131	ÁŠSEÉ		]
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	FLORID	PM 1:21	
	CT Corporation System	<b>≫</b>		
	1200 S. Pine Island Road (P.O. Box NOT acceptable)			
	Plantation, FL 33324			
The street address changed will	ess of its registered office and the street address of the business office of its rebe identical.	gistered	agent	,
	as authorized by resolution duly adopted by its board of directors or by an off ne board, or the corporation has been notified in writing of the change.			
(Special)	Finn Martensen, Secretary  (Printed or typed name and title)			
I hereby accept I further agree of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and comple id I am familiar with and accept the obligation of my position as registered as ing filed merely to reflect a change in the registered office address, I hereby is been notified in writing of this change.		rmanc ; if thi hat the	e S ?
( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	gnature of Registered Agent) //25/05			
	chalf of an entity:			
elto,	NASEEM A. CONDE			
(1	Typed or Printed Name) SPECIAL ASST. SECRETARY			

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