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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
· (Do	cument Number)	
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Certified Copies	Certificates	of Status
	_ Octobioates	Or Otatus
<u> </u>	<del>-</del>	
Special Instructions to	Filing Officer:	

Office Use Only



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01/17/17--01027--006 \*\*35.00

May 3 2017

R. WHITE



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: January 13, 2017

Order#: 462616/158

Re: SEMCO MARITIME, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Grace Kirby c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

statement of ch	ange is submitted for a corporati	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of FL or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: SEMCO MARIT	IME, INC.	
2. The principa			
	address (if different):itol Mall, Suite 670, Sacramento,		
4. Date of incor	poration/qualification: 06/11/19	92 Document number: V42843	<del></del> .
5. The name an		gistered agent and registered office on file with the	
	1200 South Pine Island Road		
	Plantation	FL 33324	
6. The name and (if changed):	d street address of the new regist  Corporation Service Company	ered agent (if changed) and /or registered office	<u>.</u> 
	1201 Hays Street	β (**) ε., **(**)	W.
		). Box NOT acceptable	7 : 1
	Tallahassee	FL 32301 (** cn	
The street address changed will	ess of its registered office and the identical.	ne street address of the business office of its registered agent,	
_		adopted by its board of directors or by an officer so been notified in writing of the change.	
Xie	E agni	Jill Cilmi, Vice President	
I hereby accept I further agree performance of agent. Or, if th hereby confirm	to comply with the provisions of mv duties, and I am familiar wi	Printed or typed name and title agent and agree to act in this capacity. I all statutes relative to the proper and complete th and accept the obligation of my position as registered by to reflect a change in the registered office address, I sotified in writing of this change.	
	snature of Registered Agehr	01/13/2016  Date	
_	chalf of an entity:	Juv	
	, Asst. Vice President		
	voed or Printed Name	_	

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