

Division of Corporations

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P07687

Florida Department of State  
Division of Corporations  
Public Access System

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To:  
Division of Corporations  
Fax Number : (850) 205-0380

From:  
Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

REGISTERED AGENT CHANGE

AAA COOPER TRANSPORTATION, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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Corporate Filing

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Alabama in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: AAA Cooper Transportation, Inc.
- 2. The principal office address: 1751 Kinsey Road, Dothan, AL 36303
- 3. The mailing address (if different): P.O.Box 6827, Dothan, AL 36302

4. Date of incorporation/qualification: 10/9/85 Document number: P07637

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

United States Corporation Company  
110 North Magnolia St.  
Tallahassee, FL 36301

6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):

C T Corporation System  
c/o C T Corporation System, 1200 South Pine Island Road  
(P.O. Box NOT acceptable)  
Plantation, Florida 33324

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

By: [Signature]  
 (Signature of an officer or director)  
 C T Corporation System

J. Steven King Chief Financial Officer  
 (Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Mary R. Adams 10/12/05  
 (Signature of Registered Agent) (Date)

If signing on behalf of an entity:  
MARY R. ADAMS  
ASSISTANT SECRETARY  
 (Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
 CR2E045 (8/05)