| (Re | questor's Name) | | | |
|---|-------------------|-------------|--|--|
| (Ad | dress) | | | |
| (Ad | dress) | | | |
| (Cit | ty/State/Zip/Phon | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu | siness Entity Nar | me) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificate: | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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2011 JAN 19 AN 10: 48

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| ORPORATION SERVICE COMPANY. | ACCOUNT NO. | : 12 | 20000000 | 195 |
|-----------------------------|------------------|--------|----------|---------|
| | REFERENCE | : 64 | 15430 | 7809601 |
| | AUTHORIZATION | | No se | seA .) |
| | COST LIMIT | | 35.00 | men |
| ORDER DATE : | January 19, 2011 | | , | |
| ORDER TIME : | 9:03 AM | | | |
| ORDER NO. : | 645430-011 | | | |
| CUSTOMER NO: | 7809601 | | | |
| | CHANGE OF A | GENT | | |
| NAME: | AUTOMOTIVE RE | NTALS, | INC. | |
| PLEASE RETURN | THE FOLLOWING AS | PROOF | F OF FIL | ING: |

EXAMINER'S INITIALS:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap

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

| statement of c | hange is submitted for a corporation org | 9502, 607.1508, or 617.1508, Florida Statutes, this ganized under the laws of the State of New Jersey ristered agent, or both, in the State of Florida. | |
|--|--|---|--|
| 1. The name o | of the corporation: AUTOMOTIVE R | ENTALS, INC. | |
| 2. The princip | al office address: | | |
| 7411 Maj | ple Avenue, Pennsauken, NJ 08109 | | |
| 3. The mailing | g address (if different): | | |
| 4. Date of inco | orporation/qualification: 04/28/1976 | Document number: 836249 | |
| 5. The name a | | d agent and registered office on file with the | |
| | NRAI Services, Inc. | SE TALL | |
| | 2731 Executive Park Dr., Ste. 4 | | |
| | Weston, FL 33331 | JAN 19 PH CRETARY OF LAHASSEE. | |
| 6. The name a (if changed) | | gent (if changed) and /or registered office | |
| | Corporation Service Company | A | |
| | 1201 Hays Street | | |
| | (P.O. Box NOT accepts | able) | |
| | Tallahassee, FL 32301 | | |
| The street add as changed wi | dress of its registered office and the stream ill be identical. | eet address of the business office of its registered agent, | |
| Such change vauthorized by | was authorized by resolution duly adop the board, or the corporation has been | oted by its board of directors or by an officer so notified in writing of the change. | |
| Den | nes & Barb | Blanca Lozada, Attorney in Fact | |
| I hereby accept I further agree of my duties, a document is becoment in his become the corporation h | pt the appeintment as registered agent e to comply with the provisions of all s and I am familiar with and accept the c seing filed merely to reflect a change in as been notified in writing of this chan tion Service Company | (Printed or typed name and title) and agree to act in this capacity. tatutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this is the registered office address, I hereby confirm that the tge. | |
| n | Signature of Registered Agent) | 01/10/2011 | |
| • | | (Date) | |
| If signing on l | behalf of an entity: | | |
| Sylvia Quep | opet, Asst. Vice President (Typed or Printed Name) | | |
| | | EEE. 425 00 + + + | |
| | " " " 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)