

Florida Department of State

Division of Corporations
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Division of Corporations
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From:
Account Name : C T CORPORATION SYSTEM
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE**TOYOTA MOTOR INSURANCE SERVICES, INC.**

Certificate of Status	0
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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 California ☒
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Toyota Motor Insurance Services, Inc.
2. The principal office address: TOYOTA LEASING, INC. 19001 S. WESTERN AVE. TORRANCE CA 90501
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 4/2/93 Document number: F93000001634

5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (If resigned, enter resigned)

PRENTICE HALL CORPORATION SYSTEM, INC.

1201 HAYS STREET, TALLAHASSEE, FL 32301-2525

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

CT Corporation System

c/o CT Corporation System, 1200 South Pine Island Road

(P.O. Box NOT acceptable)

Plantation, Florida 33324

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.

Don Bowdway
(Signature of an officer or director)

Don Bowdway Vice President
(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.

By: Don Bowdway
(Signature of Registered Agent)

03/20/2009
(Date)

If signing on behalf of an entity:

Don Bowdway, Asst. 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)

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