

PG18 000103478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/13/04--01005--007 **35.00

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04 JAN 12 PM 2:06

CLERK OF STATE
ALLAHASSEE, FLORIDA

Ps 1/14/04



January 8, 2004

FLORIDA SECRETARY OF STATE
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Attn: Corporate Filing Dept.

Re: **INTERSTATE LEASE CO., INC.**

Dear Filing Officer:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations, for the above referenced name, which is to be filed in your office. Also enclosed is check #6837 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions, please contact x153 at 800-345-4647.

Thank you,

A handwritten signature in black ink that reads 'Myra Simmons'. The signature is written in a cursive, flowing style.

Myra Simmons
Registered Agent Services
Enclosures

PO BOX 1831
AUSTIN, TX 78767

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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: INTERSTATE LEASE CO., INC.

2. The mailing address of the corporation is: 11490 Commerce Park Dr., Suite 500, Reston, VA 20191

3. Date of incorporation/qualification: 12/11/1998 Document number: P98000103478

4. The name and address of the current registered agent and office:

CT Corporation System
1200 South Pine Island Rd.
Plantation, FL 33324

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Capitol Corporate Services, Inc.
1333 North Duval St.
Tallahassee, FL 32303

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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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.

[Signature] 1/6/04
(Signature of an officer, chairman or vice chairman of the board) (Date)

Joseph F. CAMPAGNA President
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

[Signature] 1-7-2004
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

Cheryl Roberts President
(Typed or Printed Name) (Capacity)

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