## I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

DP

|                           | Electronic Signature of Registered Agent |                 |                      |
|---------------------------|--|-----------------|----------------------|
| Officer/Director Detail : |  |                 |                      |
| Title                     | PD                                       | Title           | VPD                  |
| Name                      | E.W., ANDICH                             | Name            | JOANNA, PARKER D     |
| Address                   | 6684 DANA POINT                          | Address         | 2246 S.W. 24 TERRACE |
| City-State-Zip:           | DELRAY BEACH FL 33446                    | City-State-Zip: | MIAMI FL 33145-3628  |

## The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

# SIGNATURE:

JOANNA, PARKER 2246 S.W. 24 TERRACE MIAMI, FL 33145 US

## Name and Address of Current Registered Agent:

**Current Mailing Address:** 

6684 DANA PT. CV DELRAY BEACH, FL 33446 US

**Current Principal Place of Business:** 

## FEI Number: 59-2580903

6684 DANA PT. CV. 1401 MIAMI, FL 33180

## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G38295

Entity Name: LEASING COMPANY OF AMERICA, INC.

### May 23, 2017 Secretary of State CC5395159383

FILED

Certificate of Status Desired: No

05/23/2017

Date

Electronic Signature of Signing Officer/Director Detail