698393

(Requestor's Name)				
•				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
•				
PICK-UP	☐ WAIT	MAIL		
(Busin	ess Entity Nar	ne)		
•	ŕ			
(Docu	ment Number)			
(= ===	······································			
Certified Copies	Certificates	s of Status		
Continue Copies	Commode	or States		
Special Instructions to Filing Officer:				

Office Use Only



800182858358

07/06/10--01045--016 **35.00

PILED
2010 JUL -6 PHI2: 58
SECRETARY OF STATE

R.A

TR

JUL - 8 2010

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	RSC Corporat	ion	. · . · · ·
	Name of Corpo	ration	
DOCUMENT NUM	MBER:698	393	<u>. </u>
The enclosed Staten	nent of Change of Registered Office/Ag	ent and fee are submi	tted for filing.
Please return all cor	respondence concerning this matter to t	he following:	•
			•
	Victor Lee Cha	apman .	
•	Name of Contact	Person	•
		:	
	Barrett, Chapman &	Ruta PA	
•	Firm/Compa	iny	
•	18 Wall Str	eet	
	Address	•	
		,	
•	Orlando, Florida	32801	
•	City/State and Z	p Code .	
	shannon@bcrla		·
	E-mail address: (to be used for futur	e annuai report noti	ilication)
		•	
For further information	tion concerning this matter, please call:	• !	•
*	, , , , , , , , , , , , , , , , , , , ,		
∵ . Vic	ctor Lee Chapman a	407	839-6227
Nan	ne of Contact Person	Area Code & Dayt	ime Telephone Number
•		. !	•
Enclosed is a \$35.0	0 check made payable to the Departmer	it of State.	•
	Mailing Address	Street Address	•
	Mailing Address: Amendment Section	Amendment S	
	Division of Corporations	Division of Co	•
	P.O. Box 6327	Clifton Buildi	ng
	Tallahassee, FL 32314	2661 Executiv	ve Center Circle

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508 ange is submitted for a corporation organized under the laws of the	State of Florida
	r to change its registered office or registered agent, or both, in the	State of Florida.
	he corporation: RSC Corporation	ndo Elerido 22020 2252
2. The principal	office address: 5601 South Orange Blossom Trail, Orland	100, F10110a 32039-3333
3. The mailing a	ddress (if different): Not applicable	
4. Date of incorp	poration/qualification: 08/11/1981 Document number:	698393
	street address of the current registered agent and registered office tment of State: (If resigned, enter resigned)	on file with the
;	Robert A. Faulk	<u>;</u>
	1532 Conway Isle Circle	Z211
	Orlando, Florida 32809-3598	ZHI JUL -6
6. The name and (if changed):	street address of the new registered agent (if changed) and /or reg	istered office E. F. L. S. S. S. F. L. R. I. S. S. S. S. F. L. R. I. S.
	Victor Lee Chapman	STA STA
•	18 Wall Street	(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
•	P.O. Box NOT acceptable	
	Orlando, Florida 32801	
The street address changed will	ess of its registered office and the street address of the business be identical.	office of its registered agent,
Such change wa authorized by the	as authorized by resolution duly adopted by its board of director be board, or the corporation has been notified in writing of the c	s or by an officer so hange.
Signatur	Robert A. I	Faulk, President
of my duties, and document is bei	the appointment as registered agent and agree to act in this ca to comply with the provisions of all statutes relative to the prop of I am familiar with and accept the obligation of my position a ne filed merely to reflect a change in the registered office address been notified in writing of this change.	pacity.
// /M		30, 2010
	half of an entity:	. ,
	yped or Printed Name	1

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