832933

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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(-1)		,
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE SALL AHASSEE, PLORIE

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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: District Equip	nent Company (Name of Corpo	ration)	
	(rumo or corpor	,	
DOCUMENT NUMBER: 8329	33	· .	
The enclosed Statement of Change	of Registered Office/Age	ent and fee are submitted for filing.	
Please return all correspondence co	ncerning this matter to th	ne following:	
Soon L. E.	ma a ri alc		
Sean L. Emerick (Name of Contact Person)			
	(Name of Contact	reison)	
National C	ornorate Service	s Inc	
National Corporate Services, Inc. (Firm/Company)			
	` '	••	
2 Club Cent	tre Ct., Suite 5		
<u> </u>	(Address)		
Edwardsville	e, IL 62025		
	e, IL 62025 (City/State and Zip	p Code)	
For further information concerning			
Sean L. Emer	ick at	/ 618 \ 656-3791	
(Name of Contact P	erson)	(618) 656-3791 (Area Code & Daytime Telephone Number)	
Enclosed is a \$35.00 check made p	ayable to the Department	of State.	
Mailing A	ddress: ent Section	Street Address:	
		Amendment Section	
P.O. Box	of Corporations	Division of Corporations Clifton Building	
	ee, FL 32314	2661 Executive 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, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Georgia er to change its registered office or registered agent, or both, in the State of Florida.	
	the corporation: District Equipment Company	
	l office address: 3333 Riverwood Pkwy #400	
3. The mailing a	address (if different):	
4. Date of incorp	rporation/qualification: 08/27/1974 Document number: 832933	
5. The name and	d street address of the current registered agent and registered office on file with the artment of State:	
	CT Corporation System	
	1200 S. Pine Island Road	28
	Plantation FL 33324	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	08 JUN 17 PH
	NRAI Services, Inc.	ယ္
	2731 Executive Park Drive, Suite 4	Ö
\wedge	(P.O. Box NOT acceptable) Weston, FL 33331	
The street addre	ess of its registered office and the street address of the business office of its registered agen be identical.	t,
Such change was authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.	
X	John Thomas - Vice President	-
I hereby) accept I further agree to of my duties, and document is being corporation has	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performant am familiar with and accept the obligation of my position as registered agent. Or, if the proper and complete performant in the filed merely to reflect a change in the registered office address, I hereby confirm that the specified in writing of this change.	ce iis ie
	ehalf of an entity: (Date)	

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

Sean L. Emerick, Asst. Secretary
(Typed or Printed Name)