836249

(Requestor's Name)					
(Ad	dress)				
`	•				
					
(Ad	dress)				
(Cit	y/State/Zip/Phon	e #)			
PICK-UP	MAIT	MAIL			
(Ru	siness Entity Nar	me)			
(64	Siness Entity Hai	110)			
(Do	cument Number)	•			
Certified Copies	Certificates	s of Status			
Special Instructions to	Filing Officer:				
		i			

Office Use Only



300166349143

02/01/10--01015--012 **35.00

10 FEB -1 AMII: 08

of Hour

COVER LETTER

TO: Amenda Division	nent Section of Corporations					
SUBJECT: AUTOMOTIVE RENTALS, INC.						
SUBJECT:	(Name of Corpo	oration)				
DOCUMENT NUMBER: 836249						
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
	•					
PETER F. SOUZA						
(Name of Contact Person)						
	NRAI SERVICES, INC.					
	(Firm/Comp	any)				
		OUTE 4				
	2731 EXECUTIVE PARK DRIVE, (Address					
	(7144700	,,				
	WESTON, FL 33331					
(City/State and Zip Code)						
For further infor	mation concerning this matter, please call:					
	PETER F. SOUZA	at (877) 261-6823 X 1759				
(Name of Contact Person)	at (877) 261-6823 X 1759 (Area Code & Daytime Telephone Number)				
Enclosed is a \$35.00 check made payable to the Department of State.						
	Mailing Address: Amendment Section	Street Address: Amendment Section				
	Amendment Section Division of Corporations	Amendment Section Division of Corporations				
	P.O. Box 6327	Clifton Building				
	Tallahassee, FL 32314	2661 Executive Center Circle				
		Tallahassee, FL 32301				

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

statement of chai	provisions of sections 607.0502, nge is submitted for a corporation r to change its registered office o	on organized under the laws of	the State of New Je	ersey
1. The name of the corporation: AUTOMOTIVE RENTALS, INC.			NTALS, INC.	
	office address:			
	E AVE, PENNSAUKEN, NJ 0			
3. The mailing ac	ddress (if different):			
4. Date of incorp	ooration/qualification: 04/28/1970	Document numb	_{oer:} 836249	
5. The name and	street address of the current regitment of State:			;
	C T CORPORATION SY	STEM		უ ლექტი ————————————————————————————————————
	1200 S. PINE ISLAND R	OAD		
	PLANTATION, FL 33324			
6. The name and (if changed):	street address of the new registe	red agent (if changed) and /or	registered office	AM II: 08
	NRAI Services, Inc.			·
2731 Executive Park Drive, Suite 4				
	(P.O. Box NOT Weston, FL 33331	acceptable)		
The street addre	ess of its registered office and the identical.	ne street address of the busine	ess office of its reg	istered agent,
Such change wa authorized by th	is authorized by resolution duly be board, or the corporation has	adopted by its board of direct been notified in writing of the	ctors or by an office change.	er so
(Signatu	hulo () ire of an officer or director)	K. A. Mullin, Secre	etary r typed name and title)	
I hereby accept I further agree to of my duties, and document is being corporation has	the appointment as registered of to comply with the provisions of d I am familiar with and accep ng filed merely to reflect a char bean notified in writing of this	ngent and agree to act in this fall statutes relative to the pr t the obligation of my position nge in the registered office ad change.	capacity. oper and completent as registered ago ddress, I hereby co	e performance ent. Or, if this onfirm that the
	3	//2	18/2010	
(Sig	nature of Registered Agent)		(Date)	
If signing on be	half of an entity:			

PETER F. SOUZA, ASSISTANT SECRETARY

(Typed or Printed Name)

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