

F04000001015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

(Document Number)

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01/26/09--01023--012 **35.00

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09 JAN 26 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RACR
2/20/09

January 20, 2009

VIA US REGULAR MAIL

Florida Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: **SMITH SYSTEM DRIVER IMPROVEMENT INSTITUTE,**
INC.

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

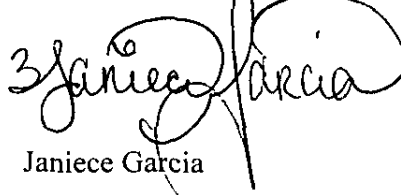
1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
2. \$35.00 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Respectfully,

REGISTERED AGENT SOLUTIONS, INC.


Janiece Garcia

**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, this statement of change is submitted for a corporation organized under the laws of the State of DELAWARE in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SMITH SYSTEM DRIVER IMPROVEMENT INSTITUTE, INC.
2. The principal office address: 2201 BROOKHOLLOW PLAZA DRIVE, SUITE 200
ARLINGTON TX 76006
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/24/2004 Document number: 04000001015
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

CORPORATION SERVICE COMPANY

1201 HAYS STREET

TALLAHASSEE FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

REGISTERED AGENT SOLUTIONS, INC.

155 OFFICE PLAZA DR., SUITE A

(P.O. Box NOT acceptable)

TALLAHASSEE FL 32301

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 accepted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Peggy Johnson
(Signature of an officer or director)

PEGGY JOHNSON VP FINANCE
(Printed or typed name and title)

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Ricardo Orozco
(Signature of Registered Agent)

1/20/09
(Date)

If signing on behalf of an entity:

Ricardo Orozco, Secretary

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

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TALLAHASSEE, FLORIDA