Division of Corporations

Florida Department of State
Rivision of Corporations
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Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023
Phone : (850)222-1092

Fax Number : (850)878-5368

REGISTERED AGENT CHANGE

MECEIVED
2009 MAR 31 AM 8: OC
SECRETARY OF STATE
ALLAHASSEE. FLORID,

FIRST VEHICLE SERVICES, INC.

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

Pursuant to the provisions of sections 607.0502, 617.050 statement of change is submitted for a corporation organ in order to change its registered office or registe	ized under the laws of the State of Delaware	
The name of the corporation: First Vehicle Services, Inc.		
The name of the corporation: The principal office address: 600 Vina Street, Suite 140	0, Cincinnati, OH 45202	
3. The mailing address (if different):		
4. Date of incorporation/qualification: 8/18/2004	Document number: F04000004753	
The name and street address of the current registered a Florida Department of State: (If resigned, enter resigned		
Corporation Serv	rice Company	
[20] Haye		
Talahassee, F	Talahassee, FL 32301	
6. The name and street address of the new registered ages (if changed):	ont (if changed) and /or registered office	
C T Corporati	on System 3	
c/o C T Corporation System, t	200 South Pine Island Road	
(P.O. Rox NOT accoptable	•	
Plantation, Flo	rida 33324	
The street address of its registered office and the street as changed will be identical.	address of the business office of its registered agent,	
Such change was authorized by resolution duly adopte authorized by die board, or the corporation has been no	d by its board of directors or by an officer so officed in writing of the change.	
(Signification of an oldinger or director)	Jennifer Shanders, Secretary	
I hereby accept the appointment as registered agent ar I further agree to comply with the provisions of all stat of my duties, and I am familiar with and accept the ob- document is being filed merely to reflect a change in the corporation has been notified in writing of this change	(Minted or typed name and tille) and agree to act in this capacity. Intes relative to the proper and complete performance ligation of my position as registered agent. Or, if this he registered affice address, I hereby confirm that the	
By: 74 A CT Corporation System	3/27/2009	
Afgnature of Registered Agent)	(Date)	
If signing on behalf of an entity:		
Megan G. Ware, Assistant Secretary		
(Typed or Printed Name)		
* * * Filing fi	ZE: \$35,00 * * *	

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

FLOOR - 10/06/3008 C T System Online

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