Fax 20005491

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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2018 OCT -8 PM 1: 02

C. GOLDEN 0CT 1 6 2018



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: October 5, 2018

Order#: 401149-003

Re: DISASTER RENTALS, INC.

Enclosed please find:

XX _ Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ashley Jiminez c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	nge is submitted for a corporati	, 617.0502, 607.1508, or 617.1508, Florida Statute ion organized under the laws of the State of MD or registered agent, or both, in the State of Florida	
1. The name of t	he corporation: DISASTER RE	NTALS, INC.	
•	office address: LLE GATEWAY DR #115, ROO	CKVILLE, MD 20850	
		nan, ROCKVILLE, MD 20852	
4. Date of incorp	poration/qualification: 08/21/20	Document number: F0600000549	1
	street address of the current reg tment of State: (If resigned, ento	gistered agent and registered office on file with the er resigned)	
	NRAI SERVICES, INC		
1200 SOUTH PINE ISLAND ROAD			
	Plantation	FL 33324 (S	2018
6. The name and (if changed):	street address of the new regist Corporation Service Company	tered agent (if changed) and /or registered officer	2018 OCT -8
	,3907	SET S	= O
	1201 Hays Street	D. Box NOT acceptable	: 02
	Tallahassee	FL 32301	
The street addre as changed will	ss of its registered office and the identical.	he street address of the business office of its regis	tered agent.
~	s authorized by resolution duly e board, or the corporation has	y adopted by its board of directors or by an officer been notified in writing of the change.	· so
<u> </u>	Cienii	Jill Cilmi, Vice President	
I further agree t performance of agent. Or, if thi hereby confirm	o comply with the provisions o my duties, and I am familiar w s document is being filed mere.	Printed or typed name and title agent and agree to act in this capacity. If all statutes relative to the proper and complete ith and accept the obligation of my position as re- ly to reflect a change in the registered office addr notified in writing of this change.	gistered ess, I
By: Dio	ce CKNO	09/24/2018 Date	
-	half of an entity:	Laic	
	Assistant Vice President		
	ped or Printed Name	_	

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