| (Re | equestor's Name) | |
|---|--------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
| | | |
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| | | |

Office Use Only



700271096057

03/30/15--01022--012 **35.00

March 23, 2015

VIA US MAIL

Florida Department of State Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: PACER INTERNATIONAL, 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. \$25 LLC \$35 Corp 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 (888) 705-7274.

Respectfully,

Samantha Campbell REGISTERED AGENT SOLUTIONS, INC. 1701 Directors Blvd., Suite 300 Austin, TX 78744

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: PACER INTERNATIONAL, INC.

Name of Corporation

DOCUMENT NUMBER: F13000002236

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:

Samantha Campbell

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd., Suite 300

Address

Austin, TX 78744

City/State and Zip Code

clientservices@rasi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Samantha Campbell

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705-7274

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

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 inge is submitted for a corporation organized under the laws of the State of Tennessee or to change its registered office or registered agent, or both, in the State of Florida. | b r |
|--|---|---|
| | the corporation: PACER INTERNATIONAL, INC. | |
| 2. The principal | office address: 6805 PERIMETER DR, DUBLIN, OH 43016. | |
| 3. The mailing a | address (if different): | |
| 4. Date of incorp | poration/qualification: 05/21/2013 Document number: F1300000223 | 6 |
| 5. The name and | d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned) | |
| | NRAI SERVICES INC | |
| | 1200 SOUTH PINE ISLAND ROAD | 1 |
| | PLANTATION, FL 33324 | ASSESSED 15 MAR |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and for registered office | DIVISION OF CORPURATION 15 MAR 30 AM 9: 3 |
| • | Registered Agent Solutions, Inc. | 9. ex |
| | 155 Office Plaza Dr. Suite A | <u> </u> |
| | Tallahassee, FL 32301 | |
| The street address changed will | ress of its registered office and the street address of the business office of its registered be identical. | i agent, |
| | vas authorized by resolution duly adopted by its board of directors or by an officer so the board, be the corporation has been notified in writing of the change. | |
| / < | Gordon Devens, Vice President | |
| I hereby accept I further agree performance of agent. Or, if th | of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete of my duties, and I am familiar with and accept the obligation of my position as register document is being filed merely to reflect a change in the registered office address, in that the corporation has been notified in writing of this change. | red I |
| - Jac | limited Registered Agent Date Date | |
| If signing on be | pehalf of an entity: | |
| | ght, Asst. 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
CRZE045 (6342)