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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: I20000000088 August 06, 2020 **KEN HOWELL** Name:_ 1247402 Reference #:__ Entity Name: DEALER INFORMATION SYSTEMS CORPORATION Articles of Incorporation/Authorization to Transact Business Amendment ✓ Change of Agent **ISSUES? CALL** Reinstatement KEN: 518-213-0738 ☐ Conversion Merger Dissolution/Withdrawal Fictitious Name

Authorized Amount:

Signature:

\$35.00

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

statement of cha	nge is submitted for a corporat	2, 617.0502, 607.1508, or 617.1508, Floi tion organized under the laws of the Stat e or registered agent, or both, in the State	e of Washington
1. The name of t	the corporation: DEALER	INFORMATION SYSTEM	S CORPORATIO
2. The principal	office address: No Change		
3. The mailing a	ddress (if different):		
4. Date of incorporation/qualification: January 17, 1997 Document number:			F97000000268
	I street address of the current returnent of State: (If resigned, en	egistered agent and registered office on f ter resigned)	ile with the
	CT CORPO	ORATION SYSTEM	
	1200 S F	PINE ISLAND RD	2873
	PLANTA	TION, FL 33324	120 120 140
6. The name and street address of the new registered agent (if changed) and /or registered o (if changed): COGENCY GLOBAL INC.			ed office' C
	115 North Calhou		
	Tallahassee, FL	O Box NOT acceptable 32301	
The street addre	ess of its registered office and be identical.	the street address of the business office	of its registered agent,
Such change wa authorized by th	as authorized by resolution dul ne board, or the corporation ha	y adopted by its board of directors or by s been notified in writing of the change	y an officer so
/s/ Heather Pruger Signature of an officer or director		Heather Pruger Printed or typed name:	Secretary and title
I further agree performance of avent. Or, if th	to comply with the provisions (my duties, and I am familiar v is document is being filed mer	l agent and agree to act in this capacity of all statutes relative to the proper and with and accept the obligation of my posely to reflect a change in the registered notified in writing of this change.	l complete sition as registered
/s/ Tim Mayville 8/5/2020			
	nature of Registered Agent half of an entity:	Date	

Tim Mayville, Assistant Secretary

Typed or Printed Name

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