F97000006541

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M. MILLIGAN EXAMINER

APR -1 2014

COVER LETTER

TO:	Amendment Section
	Division of Corporations

SUBJECT: DIRECT ADMINISTRATION, INC
Name of Corporation
POCLIMENT NUMBER: F97000006541

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:

Name of Contact Person

CT Corporation

Firm/Company

111 8th Ave, 13th Floor

Address

New York, NY 10011

City/State and Zip Code

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

For further information concerning this matter, please call:

Marie Hauer
Name of Contact Person

at (212)894-8504
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

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 ange is submitted for a corporation organized under the laws of the State of Tennessee er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: DIRECT ADMINISTRATION, INC.
	office address:
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 12/11/1997 Document number: F9700006541
	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.
	515 EAST PARK AVENUE
	TALLAHASSEE, FL 32301
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office
	1200 South Pine Island Road
	P.O. Box NOT acceptable Plantation, Florida 33324
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Signatur	ire of an officer or director Printed or typed name and title
I further agree t performance of agent. Or. if thi	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.
Kartilo	03/24/14
/	nature of Registered Agent Date
,	chalf of an entity:
Kathleen Fr	Yped or Printed Name

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