

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000073635 3)))



H090000736353ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name ; C T CORPORATION SYSTEM

Account Number : FCA0000000023 : (850)222-1092 Phone Fax Number

: (850)878-5368

REGISTERED AGENT CHANGE

TOYOTA LEASING, INC.

Certificate of Status	0
Certified Copy	()
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

statement of chan	ge is submitted for a corporation or	0502, 607.1508, or 61:11508, Florida Statut ganized under the lawying the State of <u>Califo</u> gistered agent, or both, fifthe State of Florid	rnia 🔛
1. The name of th	corporation: Toyota Learing, Inc.		
2. The principal o	ffice address:	ERN AVE.TORRANCE CA 90501	
3. The mailing ad	dress (if different):	i	
4. Date of incorpo	ration/qualification; DS/04/98	Document number: F98000002566	5
	street address of the current register nent of State: (If resigned, enter res	ed egent and registered office on file with the (good)	.
	CORPORATION SERVICE COMPA	MY	
	1201 HAYS STREET, TALLAHASS	EE, FL 32301-2525	200 TAL TAL
6. The name and (if changed):	•	agant (if changed) and for registered office oration System	2009 MAR 30 PM SECRETARY OF ALLAHASSEE, F
<u> </u>		STA:	
	,	n, Florida 33324	PA 25
		treet address of the business office of its re	
Such change was authorized by th	s authorized by resolution duly ad a board, or the corporation has been	opted by its board of directors or by an off on notified in writing of the change.	ficer so
Da 7	Board	Don Bondway Vice President	
I hereby accept I further agree to of my duties, an document is bei corporation has	wot substice of director) the appointment as registered age of comply with the provisions of all if am familiar with and accept the age filed merely to reflect a change been notified in writing of this ch CT Corporation System	(Printed or typed himse and title, and agree to act in this capacity. I statutes relative to the proper and comple obligation of my position as registered a in the registered office address, I hereby a large.	
By: Jan	Box (03/20/2009		, , , , , , , , , , , , , , , , , , ,
(Si)	mature of Regulated Austral	(Dute)	
- -	half of an autity: WAY, Asst. Secretary Species Princed Marrie)		,
	V	G FEE: \$35,00 * * *	

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

CR25045 (8/05)

FL006 - 10/06/2004 C T System Cistine