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.

(((H21000249424 3)))



H210002494243ABC

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 : NRAI SERVICES, LLC

Account Number : I20080000104 : (302)674-4089 Phone

Fax Number : (302)674-5266

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: dmy@potamkinfamily.com

REGISTERED AGENT CHANGE PDS DEALER SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

MUN 2 8 2021 S. PRATHER

Electronic Filing Menu

Corporate Filing Menu

Help

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

1. The name of the corporation: PDS Dealer Services, Inc.	
SRINI NW 171 or Servent	
2. The principal office address: 5800 NW 171st Street Miami, Fl 33015	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 11/10/1998 Document number: F98000006196	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
David Yusko	
5800 NW 171st Street	202
Miami, Fl 33015	2021 JUN
6. The name and street address of the new registered agent (if changed) and for registered office (if changed):	25
NRAI Services, Inc.	3 HV
1200 South Pine Island Road	g: 3g
P.O. Box. NOT socquible	6
Plantation, Florida 33324	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
John Rhodes, VP	
Signifure of an officer or director Primited or typed name and title	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
NRAI Services, Inc. 6/23/2021	
If signing on behalf of an entity:	
Typed or Printed Name	
2000	
* * * FILING FEE: \$35.00 * * * MAKE CHECKS PAVABLE TO FLORIDA DEPARTMENT OF STATE	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)

H21000249424 3

By: