

2017-09-06 10:19:22 CST

19542080845 From: Randee McGraw

Power 25936

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number: (850) 617-6380

From: Account Name: C T CORPORATION SYSTEM  
Account Number: FCA000000023  
Phone: (512) 418-6949  
Fax Number: (954) 209-0845

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

Email Address: \_\_\_\_\_

REGISTERED AGENT CHANGE

DTS DIRECT MAIL AND FULFILLMENT SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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C. GOLDEN

SEP - 7 2017

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: DTS DIRECT MAIL AND FULFILLMENT SERVICES, INC  
Name of Corporation

DOCUMENT NUMBER: P00000085936

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:

Tawana Blackmon

Name of Contact Person

DTS Direct Mail & Fulfillment Services Inc.

Firm/Company

200 Circle Drive North

Address

Piscataway NJ 08854

City/State and Zip Code

tblackmon@directmaildepot.com

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

For further information concerning this matter, please call:

Tawana Blackmon

732 469-5900

Name of Contact Person

at ( ) 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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: DTS DIRECT MAIL AND FULFILLMENT SERVICES, INC.
2. The principal office address: 200 Circle Drive, North Piscataway, NJ 08854
3. The mailing address (if different): PO BOX 10309, NEW BRUNSWICK, NJ 08906
4. Date of incorporation/qualification: 09/08/2000 Document number: P00000085936
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)  
MURPHY, DERMOT CEO  
1200 South Pine Island Road  
Plantation, FL 33324
6. The name and street address of the new registered agent (if changed) and/or registered office: (if changed):  
C T Corporation System  
c/o C T Corporation System, 1200 South Pine Island Road  
P.O. Box NOT acceptable  
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.

\_\_\_\_\_  
 Signature of an officer or director Christopher Trainer  
 Printed 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.

By: Sherry McGinnes  
 Signature of Registered Agent

09-06-2017

Date

If signing on behalf of an entity:

Sherry McGinnes, Assistant 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  
 CR2E(45) (03/12)

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