

P04000028327

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 : (850) 222-1092
Fax Number : (850) 878-5368

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REGISTERED AGENT CHANGE AMERIQUEST REMARKETING SERVICES, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$43.75

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AMERIQUEST REMARKETING SERVICES, INC.
Name of Corporation

DOCUMENT NUMBER: P04000028327

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:

David Berezowski, Sr. Customer Specialist

Name of Contact Person

CT Corporation

Firm/Company

1200 South Pine Island Road

Address

Plantation, FL 33324

City/State and Zip Code

david.berezowski@wolterskluwer.com

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

For further information concerning this matter, please call:

Diane Mashioff

Name of Contact Person

at (856) 382-4703
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

CR2B045 (8/05)

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: AMERIQUEST REMARKETING SERVICES, INC.
2. The principal office address: 12530 WEST ATLANTIC BLVD. CORAL SPRINGS FL 33071
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/10/2004 Document number: P04000028327
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)

MUNROE, W. BRADLEY ESQ.

239 E. VIRGINIA STREET

TALLHASSEE FL 32301

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.

Richard Spotts
Signature of an officer or director

Richard Spotts, Vice President of Operation & Admin
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: C.T. Corporation System
Signature of Registered Agent

03/12/12

Date

If signing on behalf of an entity:

Katie Szramek
Assistant Secretary

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

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

CR2BD45 (8/05)

FL006 - 01/23/2009 C.T. System Outline