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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)558-1515

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

## REGISTERED AGENT CHANGE ZIPPY RENT-A-CAR, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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Corporate Filing Menu

Helm

9-24-10

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

Pursuant to the provisions of sections 607.0502, 617.0502 statement of change is submitted for a corporation organt: in order to change its registered office or register	zed under the laws of the State of Florida		<del>-</del>	
1. The name of the corporation: ZIPPY RENT-A-CAR	-			
2. The principal office address: 27365 U.S. Highway 1	9, North Clearwater, FL 33761			_
3. The mailing address (if different):				_
4. Date of incorporation/qualification: 11/06/1992	Document number: P92000002754			
<ol><li>The name and street address of the current registered ag Florida Department of State:</li></ol>	ent and registered office on file with the			
CT Corporation System		1	<b>⇒</b> ;	
c/o CT Corporation System, 1200 South Pine Island Road				
Plantation, FL 33324			23	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		海军	SEP 23 AM 10: 56	
Corporation Service Company			<u>5</u>	
1201 Hays Street		(ロッサ) なみ	(JY	
(P.O. Box NOT acceptable)				
Tallahassee, FL 32301				
The street address of its registered office and the street as changed will be identical.	address of the business office of its regist	ered age	at,	
Such change was authorized by resolution duly adopted authorized by the board, or the corporation has been not	by its board of directors or by an officer lifted in writing of the change.	so		
Beginster of an orriver or direction)	Blanca Lozada, Attorney in Fact		<del></del>	
I hereby accept the appointment as registered agent and I further agree to comply with the provisions of all statu of my duties, and I am familiar with and accept the oblid document is being filed merely to reflect a change in the corporation has been notified in writing of this change.	(Printed or typed name and title) d agree to act in this capacity, stes relative to the proper and complete p gation of my position as registered agent e registered office address, I hereby confi	erformar . Or, if t rm that t	nce his he	
By: A Company	September 23, 2010		_	
(Signature of Registered Agent)  If signing on behalf of an entity:	(Date)			
Grace E. Kirby, Assistant Vice President (Typed or Printed Name)				
(Types or rimes (value)  * * * FILING FE	E; \$35.00 * * *			

\* \* \* FALING FEE; \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)