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Requester's Name		
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	Offi	ce Use Only
CORPORATION NAME(S) & D	OCUMENT NUMBER(S), (if kno	
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☐ Walk in ☐ Pick up ti	me	Certified Copy
Mail out Will wait	Photocopy	Certificate of Status
NEW FILINGS	AMENDMENTS	
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Change of Registered Dissolution/Withdray Merger	d Agent
OTHER FILINGS	REGISTRATION/QUA	<u>LIFICATION</u>
☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnership	

Reinstatement
Trademark
Other

Examiner's Initials

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, the undersigned corporation organized under the laws of the State of Florida Statutes.
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida. 1. The name of the corporation is: Dealer Development Services, Inc
2. The mailing address of the corporation is: 5200 - S. Washington Hue.
Titusville, FC 32780
3. Date of incorporation/qualification: 415193 Document number: P93000D2626
4. The name and address of the current registered agent and office:
Robert J. Downing
Same as corp.
AH AR
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Bonald W. Anderson
lane as corp.
DA A
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.
tall: Dann Secretary 3/15/0
(Signature of an officer, chairman or vice chairman of the board) (Date)
Cillian Clover Secretary (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity: Royald W. Anderson, Chief Operation Officer (Typed or Printed Name)

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