

Division of Corporations

PG7000042227  
Florida Department of State  
Division of Corporations  
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FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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

From:  
Account Name : NRAI SERVICES, LLC  
Account Number : I20080000104  
Phone : (302)674-4089  
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: dmv@potamkinfamily.com

**REGISTERED AGENT CHANGE  
A & R WEST DADE, INC.**

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

JUN 28 2021

S. PRATHER

Electronic Filing Menu

Corporate Filing Menu

Help

**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: A&R West Dade, Inc.

2. The principal office address: 5800 NW 171st Street  
Miami, FL 33015

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 05/08/1997 Document number: P97000042227

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 Yustis  
5800 NW 171st Street  
Miami, FL 33015

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NRAI Services, Inc.  
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.

John Rhodes  
Signature of an officer or director

John Rhodes, VP  
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.

NRAI Services, Inc.

By: John Rhodes  
Signature of Registered Agent

6/23/2021  
Date

If signing on behalf of an entity:

Pathi Gethu  
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  
CR2E045 (04/13)