

Division of Corporations Electronic Filing Cover Sheet

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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

: (050)878-5368

\*\*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 PROCTOR FINANCIAL, INC.

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

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C. MUSIAIN

Electronic Filing Menu

Corporate Filing Menu

Help

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3/20/2012

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## COVER LETTER

SUBJECT:	PROCTOR FINAN	CIAL, INC.		
Name of Corporation				
DOCUMENT NUMBER:	VUMBER: F02000004164			
	ange of Registered Offic	e/Agent and fee are submitted for filing.		
Please return all correspondenc				
•				
	Name of Cor	ntact Person		
	V, <b>u</b>	,		
	Firm/Co	mpany		
	Addi	ess		
	City/State an	d Zip Code		
	pbriand@bbin			
E-mail addi	ress; (to be used for tu	ture annual report notification)		
or further information concern	ing this matter, please or	all;		
Name of Contact	Person	at () Area Code & Daytime Telephone Nu		
nclosed is a \$35.00 check made	e payable to the Departs	nent of State.		
Muiling	Address: ment Section	Street Address: Amendment Section		
	n of Corporations	Division of Corporations		
	ix 6327	Clifton Building		
	ssee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

Z609EE9998 8Z:60 ZT0Z/0Z/E0

CT CORPORATION

FL006 - 03/21/2009 C Y System Online

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

statement of ch	ange is submitted for a co	rporation organis	, 607.1508, or 617.1508, Flo sed under the laws of the Stat ed agent, or both, in the State	e of MICHIGAN
	<del>-</del> -		PROCTOR FINANCIAL, IN	
2. The principa	l office address: 200 KIRT	'S BLVD, SUITE	160	
3. The mailing				
4. Date of incor	poration/qualification:	08/16/2002	Document number:	F02000004164
	d street address of the current of State: (If resigne		ent and registered office on file)	le with the
	CORPORATION SERVI	CE COMPANY		
	1201 HAYS STREET	· <del>-</del>		The state of the s
	TALLAHASSBE FL 323	01-2525		20
6. The name and (if changed):	i street address of the new	registered agent	(if changed) and /or registered	doffice 2:
	C T Corporation System			
	c/o C T Corporation Syste	m, 1200 South Pir	e Island Road	
	Plantation, Florida 33324	P.O. Box NOT	coeptable	
The street address changed will	ess of its registered office be identical.	and the street ac	dress of the business office	of its registered agent,
Such change we authorized by the	is authorized by resolutions board, or the corporation	n duly adopted b on has been notif	y its board of directors or b	y an officer so
K-WX	topole _		Kristin Bolden, !	Secretary
Signular I hereby accept I further agree to of my dulles, and document is bein corporation has	the appointment as regis o comply with the provis of I am familiar with and no filed merely to reflect been notified in writing	tered agent and dions of all statute accept the oblige a change in the forther this change.	erinted or typed name agree to act in this capacity, is relative to the proper and ation of my position as regis egistered office adaress, I h	complete performance tered agent. Or, if this ereby confirm that the
	Corporation System A. C.	١٨	3/1/2012	
	ature of Registered Agent	tet .	Date	
	nalf of an entity: mes M. Halpin asistant Secretary			·
	ped or Printed Name	· · · · · · · · · · · · · · · · · · ·	,	
		FILING FEE:		
MA Crze045 (8/05)			DA DEPARTMENT OF STATE BOX 6327, TALLAHASSEE,	

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CT CORPORATION

PL006 - 07/23/2009 C T Spittin Civiline