02000004877

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RA Change 09/05/04

PREMIER CORPORATE SERVICES, INC.

200 West Adams Street, Suite 2007 Chicago, IL 60606 (312) 346-3606 (800) 934-2556 Fax: (312) 346-3607

September 1, 2004

VIA REGULAR MAIL

Division Of Corporations Florida Department Of State 409 E. Gaines Street Tallahassee, FL 32399

RE: AmeriFirst Holding Corp.

AmeriFirst Financial Services, Inc.

AmeriFirst Capital Corp.

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the form to change the registered agent/office for the above captioned in your state. Also enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

Tony Alexander

TA/smc. Encl.

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

	provisions of sections 607.0502, 617			statement of	
=	nitted for a corporation organized und	• • • • •	laware	in order	
to change us re	gistered office or registered agent, or	ooin, in the State of Florida.			
1. The name of	the corporation: AmeriFirst Holding	ng Corp.	* * * *		
2. The principal	l office address: 814 A1A North, Su	iite 300, Ponte Vedra Beach,	FL 32082		:
		<u> </u>	<u> </u>		
3. The mailing	address (if different):		<u> </u>		
4. Date of incom	rporation/qualification: 9/25/02	Document number:	F02000004877		=
	nd street address of the current register artment of State:	red agent and registered office	on file with the		
	Dan W. Armstrong		<u> </u>	, :=:	
	822 A1A North, Suite 303				
	Ponte Vedra Beach, FL 32082		<u>.</u>	AK S	<u></u>
6. The name an (if changed):	nd street address of the new registered	agent (if changed) and /or regi	stered office	ώ Σ	SEP -
	NRAI Services, Inc.			SES Asy	∞
	526 E. Park Avenue				2
	(P.O. Box or pers	sonal mailbox NOT acceptable)		- T-	n n
	Tallahassee, FL 32301	·	·	ے سرت ۔ م	သ
The street addr changed will b	ress of its registered office and the st	reet address of the business o	ffice of its registered	l agent, as	
Such change we the board, or the	vas authorized by resolution duly add ne corporation has been notified in w	opted by its board of directors viting of the change.	or by an officer so a	authorized by	
/	engrature of an obligat or director)		ted or typed name and title)	Secretar	
I hereby accep I further agree duties, and I a being filed mer been notified in NRAI Sentice	t the appointment as registered ager to comply with the provisions of all m familiar with and accept the oblig rely to reflect a change in the registe n writing of this change.			rmance of my is document is oration has	
by: Coll	(Mynature of Registered Agent)	8	/31/04 (Date)		ž.
If signing on b	chalf of an entity:				
Anthony J. Al	lexander	Assistant Sec	retarm		

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

(Capacity)

(Typed or Printed Name)