## F04000001737

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Sasinos Links, Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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05/16/05--01015--008 \*\*35.00



RA. Change

C. Coulliste MAY 2 3 2005



## Regulatory Counsel Group, Inc.

Mortgage Licensing & Compliance Advisors

www.regulatorycounsel.com

May 13, 2005

Registration Section Division of Corporations 409 East Gaines Street Tallahassee, FL 32399 850-245-6051

RE: America's Home Loan Corporation

To Whom It May Concern:

This provides you with information on behalf of <u>America's Home Loan Corporation</u> to change their Registered Agent in your state. I have enclosed the following:

- 1. A check in the amount of \$35.00 (filing fee)
- 2. Three (3) original Statements of Change (signed)
- 3. A self-addressed, stamped envelope to send one approved original back to RCG's attention.

Please send all correspondence to: Regulatory Counsel Group, Inc. 295 West Crossville Road Suite 530 Roswell, GA 30075

Thank you for your cooperation. If you have any questions, please contact me via phone at (770) 992-7779, via email at ediehl@rcgteam.com, or via fax at (770) 992-0779.

Sincerely,

Emily H. Diehl Account Executive

Enclosures

## COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: America's Home Loan Corporation (Name of corporation)
, (c. mile of outpointion)
DOCUMENT NUMBER: F04000001737
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Emily H. Diehl (Name of contact person)
(Name of contact person)
Regulatory Counsel Group, Inc. (Firm/Company)
295 West Crossville Road, Suite 530 (Address)
Roswell, GA 30075 (City/state and zip code)
For further information concerning this matter, please call:
Emily Diehl at (770 ) 992-7779
(Name of contact person) (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address: Amendment Section Division of Corporations Pivision of Corporations 409 E. Gaines Street Tallahassee, FL 32319

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

statement of ch	provisions of sections 607.0502, 617.0502, ange is submitted for a corporation organize er to change its registered office or registere	
	the corporation: America's Home Loan Cor	·
	office address: 2143 WOOD GLEN LANE	
z. The principal	office address.	
2 The mailing	address (if different);	
5. The manning a	, <u> </u>	
4. Date of incor	poration/qualification: 03/30/2004	
5. The name and Florida Depa	d street address of the current registered ager	nt and registered office on file with the
	C T CORPORATION SYSTEM	
	1200 SOUTH PINE ISLAND ROAD	
	PLANTATION FL 33324	05 M
6. The name and (if changed):	d street address of the new registered agent (	
	NRAI Services, Inc.	
	2731 Executive Park Drive, Suite 4	
	(P.O. Box NOT acceptable)	
	Weston, FL 33331	<u>an an mar merekan</u> pama ta <u>ri di</u>
The street address changed will	ess of its registered office and the street ad be identical.	dress of the business office of its registered agent,
Such change wa authorized by the	as authorized by resolution duly adopted be board, or the corporation has been notified.	y its board of directors or by an officer so led in writing of the change.
Henr (Signati	re of An Officer or director)	Glenn Radford, CEO/President (Printed or typed name and title)
Corporation has	the appointment as registered agent and a to comply with the provisions of all statute and I am familiar with and accept the obligating filed merely to reflect a change in the resident position in writing of this change.	agree to act in this capacity. Is relative to the proper and complete performance attion of my position as registered agent. Or, if this egistered office address, I hereby confirm that the
•	half of an entity:	(2007)
	sistant Secretary Typed or Printed Name)	ing san sangan sa ang ang ang ang ang ang ang ang ang an

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