F0600001175

(Requestor's Name)	_
(Address)	_
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	1

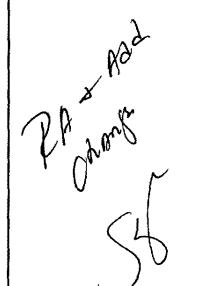
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TALLAH AGSEY OF STATE

COVER LETTER

TO: Amendment Division of C					
SUBJECT: Come	rica Securities, Inc.				
(Name of Corporation)					
DOCUMENT NUM	BER:F06000001175				
The enclosed Stateme	ent of Change of Registered Office/Age	nt and fee are submitted for filing.			
Please return all corre	espondence concerning this matter to the	following:			
1.	isa A. Walker				
	(Name of Contact I	erson)			
	•				
Co	merica Securities, Inc.				
	(Firm/Compan	у)			
2	Ol West Fort, 3rd Floor				
<u></u>	(Address)				
D	etroit, Michigan 48226-3137				
(City/State and Zip Code)					
For further information	on concerning this matter, please call:				
Cheryl C. Su	dney	313 222-3778			
(Name	e of Contact Person)	313 222-3778 (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State ofer to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: Comerica Securities, Inc.	
	office address: 201 West Fort Street, 3rd Floor,	
<u> </u>	Detroit, Michigan 48226-3137	
3. The mailing a	address (if different): Same	
4. Date of incorp	poration/qualification: October 10,1985 Document number: F06000001175	
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State:	
	Ted Corbin	
	3001 Tamiami Trail N., Suite 100	
	Naples, Florida 34103-4172	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	
	CT Corporation System SSR 30 1	
	1200 South Pine Road	
	Plantation, Florida 33324	
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.	
Muta	Robert W. Spencer, Jr, Assistant Secretary (Printed or typed name and title)	
l further agrée to of my duties, and document is beir	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change.	
A = A = A = A = A = A = A = A = A = A =	TWW Asst Servetory 3/23/610 gnature of Registered Agent) (Date)	
If signing on bel	half of an entity:	
Jessica Eise	seLe	

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