L01000022542

(Red	questor's Name)	<u> </u>
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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: NATIONAL FINANCE (Name of Limite	cd Liability Company)		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this n	natter to the following:		
WILLIAM CHONG (Name of Person)	THE SEE OF		
NATIONAL FINANCE (ROUP, L. (Firm/Company)	C PRIDE 1:53		
1927 LONGBAY BLUD (Address)			
SARA SUTA FL 3434 (City/State and Zip Code)	3		
For further information concerning this matter, ple	ase call:		
(Name of Person) at (941) 746 - 1167 (Area Code & Daytime Telephone Number)		
,	, in the second		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327		
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314		
Enclosed is a check for the following amount:			
\$25 Filing Fee	\$55 Filing Fee & Certified Copy		



January 9, 2006

WILLIAM CHONG NATIONAL FINANCE GROUP, LLC 7927 LONGBAY BLVD. SARASOTA, FL 34243

SUBJECT: NATIONAL FINANCE GROUP, LLC

Ref. Number: L01000022542

We have received your document for NATIONAL FINANCE GROUP, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please provide the mailing address of the LLC in section 2.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 306A00001442



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 25, 2006

WILLIAM CHONG NATIONAL FINANCE GROUP, LLC 7927 LONGBAY BLVD. SARASOTA, FL 34243

SUBJECT: NATIONAL FINANCE GROUP, LLC

Ref. Number: L01000022542

We have received your document for NATIONAL FINANCE GROUP, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Thank you for returning your form with your mailing address added to it. Unfortunately, you still did not sign it, as requested in our previous letter. Please sign the highlighted signature line and return the form to me with a copy of this letter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 006A00005261



STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the limited liability company is: MATIBARE FINANCE COROUP, LLC.
2. The mailing address of the limited liability company is: 7927 Large buy Blvd
Sacasola, FL 34243
12/34/01 LO10000 22542 3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: CHONG, WILLIAM Name
1306 MANNITE ACE. UEST Address Address City, State and Zip
6. The name and address of the new registered agent and/or office:
CHONG, WILLIAM SAME 7927 LONGAN BLUD Florida street address (P.O. Box NOT acceptable) SARA SOTA FL 34243 City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)
(Printed or typed name of signee)
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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00