

FB6000/2285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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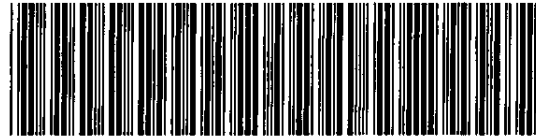
(Business Entity Name)

(Document Number)

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07 MAR 15 AM 9:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 28, 2007

RAFAEL OLACIO
COUNTRYONE MORTGAGE INC
6780 PEMBROKE ROAD
PEMBROKE PINE, FL 33023

SUBJECT: COUNTRYONE INC
Ref. Number: P06000122875

We have received your document for COUNTRYONE INC and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6908.

Sylvia Gilbert
Document Specialist

Letter Number: 807A00014464

RECEIVED
07 MAR 15 AM 8:00
DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COUNTRYONE INC
(Name of Corporation)

DOCUMENT NUMBER: PD6000122875

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:

Rafael Olacio
(Name of Contact Person)

COUNTRYONE MORTGAGE INC
(Firm/Company)

6780 Pembroke RD
(Address)

Pembroke Pine, FL 33023
(City/State and Zip Code)

For further information concerning this matter, please call:

Rafael Olacio at (954) 394-9988
(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COUNTRYONE INC
(Name of Corporation)

DOCUMENT NUMBER: P06000122875

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:

RAFAEL M OLACIO
(Name of Contact Person)

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(Firm/Company)

6780 PEMBROKE RD
(Address)

PEMBROKE PINE, FL 33023
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2661 Executive Center Circle
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: COUNTRYONE INC
2. The principal office address: 6780 PEMBROKE RD
PEMBROKE PINE, FL 33023
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/01/2006 Document number: P06000122875
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

RAFAEL M OLACIO

6301 SW 32 ST

MIRAMAR, FL 33023

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

RAFAEL M OLACIO

6780 PEMBROKE RD

(P.O. Box NOT acceptable)

PEMBROKE PINE, FL 33023

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Rafael M. Olacio
(Signature of an officer or director)

Rafael M. Olacio
(Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Rafael M. Olacio
(Signature of Registered Agent)

3-05-07
(Date)

If signing on behalf of an entity:

Rafael M. Olacio
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (8/05)

FILED
07 MAR 15 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA