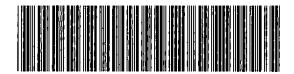
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ALLAHASSEF FINDING

R.A. Charge C.COULLIETTE

OCT 222008

EXAMINER

COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJE	CCT: Novopayment Inc (Name of Corp.	oration)		
DOCU	MENT NUMBER: <u>P07000108975</u>			
The end	closed Statement of Change of Registered Office/A	gent and fee are submitted for filing.		
Piease i	return all correspondence concerning this matter to	the following:		
JORGE R SALCEDO				
(Name of Contact Person)				
DIAZ REUS & TARG LLP (Firm/Company)				
	(and a surp	- •		
100 SE 2nd Street Suite 2600				
	(Address)		
Miami, Florida, 33131 (City/State and Zip Code)				
For furt	ther information concerning this matter, please call:	ip code)		
ro, tuit	ner information concerning this matter, prease can.			
	Jorge R. Salcedo a	t (305) 375 9220 (Area Code & Daytime Telephone Number)		
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclose	ed is a \$35.00 check made payable to the Departmen	nt of State.		
	. ,			
	Mailing Address: Amendment Section	Street Address:		
		Amendment Section		
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
	Tallahassee, FL 32314	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 inge is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: Novopayment Inc	
2. The principal	office address: 1111 Brickell Avenue Suite 1580, Miami, Florida, 33131	
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 10/02/2007 Document number: P07000108975	
	street address of the current registered agent and registered office on file with the treet of State: (If resigned, enter resigned)	
	Registered Agent Corporation Services, Inc	
	355 Alhambra Circle Suite 801	
	Coral Gables, Florida, 33134	
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office	i sus. Y
The section of the se	JSH Register Agent Services, Inc	Market Person
y sample of the	100 SE 2nd Street Suite 2600 (P.O. Box NOT acceptable)	77
	Miami, Florida, 33131	Ĵ
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 le board, or the corporation has been notified in writing of the change.	
(Signatu	Anabel Perez Moreno (Printed or typed name and title)	
I haraby against	the appointment as registered agent and agree to act in this capacity, o comply with the provisions of all statutes relative to the proper and complete performance of I am familian with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.	
- (Sig	(Date)	
	half of an entity:	
JSH Reg	vister Agent Services, Inc. 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)