

P 97000100843

Requestor's Name

N.A.F.A.,
Attorney Service Bureau
NATIONAL ASSOCIATION FOR FOREIGN ATTORNEYS
AND ATTORNEY REFERRAL AGENCY
11890 S.W. 8th Street, PFI
Miami, Florida 33184

Office Use Only

COF

BER(S), (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- Walk in Pick up time _____ Certified Copy
- Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

ROA Change
6-8-99
BMS

Examiner's Initials

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, the undersigned corporation organized under the laws of the State of Florida 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 corporation is: N.A.F.A., National Association for Foreign Attorneys, Inc.

2. The mailing address of the corporation is: 10008 West Flagler Street, Suite B-126 Miami, FL 33174

3. Date of incorporation/qualification: 11-17-1997 Document number: P97000100843

4. The name and address of the current registered agent and office:

Humberto R. Pacheco
10008 West Flagler Street, Suite B-126
Miami, FL 33174

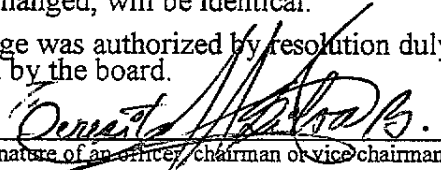
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Humphrey H. Pachecker
11890 S.W. 8th Street, Suite 100
Miami, FL 33184

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STATE
TALLAHASSEE, FLORIDA

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

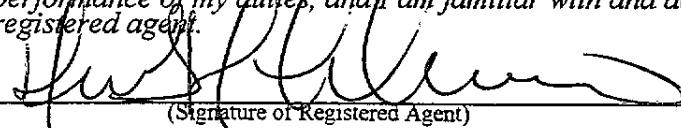
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.


(Signature of an officer, chairman or vice chairman of the board)

5-28-99
(Date)

Teresita SilvaBarrera, Vice-President
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.


(Signature of Registered Agent)

5-28-99
(Date)

If signing on behalf of an entity:

Humphrey H. Pachecker
(Typed or Printed Name)

(Capacity)

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