

V42450

 Ideal
Collection
Services, Inc.

P.O. Box 272407 • Tampa, Florida 33688-2407

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

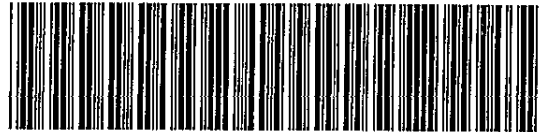
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700021361447

07/10/03--01009--004 **35.00

FILED

03 JUL 10 PM 2:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. Chg
MAD 7/10/03

**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: Ideal Collection Services, Inc.
2. The principal office address: 5223-A Ehrlich Road, Tampa, FL
336024
3. The mailing address (if different): P.O. Box 272407 Tampa, FL
336088
4. Date of incorporation/qualification: 6/08/1992 Document number: V42450
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Anthony Presti
5223-A Ehrlich Road
Tampa, FL 336024

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

CHARLES V. BARRETT III, ESQUIRE
307 S. FIDELITY AVE
(P.O. Box or personal mailbox NOT acceptable)
TAMPA FL 33606

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.

Shelly B. Fougereousse
(Signature of an officer, chairman or vice chairman of the board)

Shelly B. Fougereousse, President
(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.

[Signature]
(Signature of Registered Agent)

7/1/03
(Date)

If signing on behalf of an entity:

CHARLES V. BARRETT III
(Typed or Printed Name)

REGISTERED AGENT
(Capacity)

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

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

FILED
03 JUL 10 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA