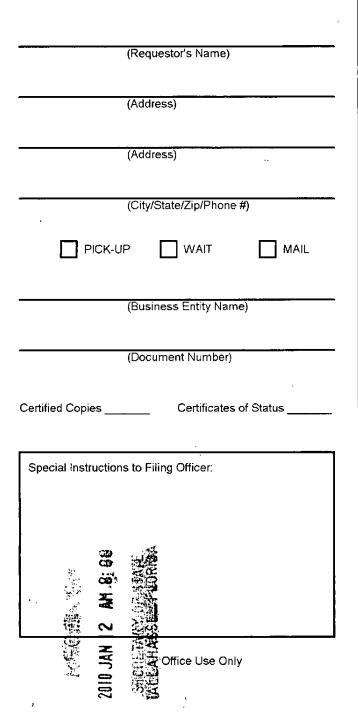
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Rocharge Newis 1-27-10

COVER LETTER

. . . .

TO: Amendment Section Division of Corporations
SUBJECT: Stever G. W. Har. P.A. Name of Corporation
DOCUMENT NUMBER: 1 35961
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:
Steven G. Wrther, Name of Contact Person
Star G. Witter P. A. Firm/Company
U338 Presidential lower, Su. 4 102 Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
String G. Wither at (239) 470-5428 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

TO:



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 12, 2010

STEVEN G. WITTER GARFIELD MORTGAGE, INC. 6338 PRESIDENTIAL COURT, SUITE 102 FORT MYERS, FL 33919

SUBJECT: STEVEN G. WITTER, P.A.

Ref. Number: L35961

We have received your document for STEVEN G. WITTER, P.A. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 810A00000975

IN JAN 22 AM 8: 00
ECRETARY OF STATE

District of Commentions D.O. DOV 6207 Mellahaman Flacial 20014

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

Pursuant to the p statement of chan	ige is submitted fo	or a corporation	n organized una	ler the laws oj	f the State of _	Florida
	to change its reg	-				orida.
1. The name of the			A	· .	="	
2. The principal of	office address:					102
		FUTT	Mycrs.	FL 339	1/4	
3. The mailing ad	ldress (if different):				
4. Date of incorpo	oration/qualificati	on: 11/24	7 1949 DO	ocument num	ber: <u>L3</u>	5961
	street address of t ment of State: (If			registered of	fice on file with	the Toy
-			6. WA			是
		71816	ollege Pa	-Kway,	Jn. Jr 32	ASSE V
-		fort m	yla fi	33907		E. F. 57
6. The name and (if changed):	street address of t	he new register	red agent (if cha	nged) and /or	registered offic	e PAILE 33
		Steven	6 W.A	ter		
		6338 /	Cs, dentio	I loud	Ju. te 10	2
			hyee fl			
The street addres as changed will l	ss of its registere be identical.		,		ess office of its	registered agent,
Such change was authorized by the	s authorized by ree board, or the co	esolution duly orporation has	adopted by its been notified ir	board of dire writing of th	ctors or by an le change.	officer so
Stature Signature	of an officer or director	or		S frue Printed or	typed name and titl	Her_
I hereby accept to I further agree to of my duties, and document is bein corporation has	the appointment of comply with the difference of the lam familiar was filed merely to been notified in	as registered a provisions of ith and accept reflect a chan writing of this	gent and agree all statutes rele the obligation ge in the regist change.			plete performance Lagent. Or, if this y confirm that the
_ <i>Stoff</i>	ature of Registered Ag	enf			120/201	J.
If signing on beh					Date	
Struct	A Wiffe ped or Printed Name					

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