Division of Corporations

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Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)922-4000

From:

Account Name : BILZIN, SUMBERG DUNN PRICE & AXELROD LLP

Account Number : 075350000132

Phone

(305) 374-7580

Fax Number

(305) 350-2446

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REGISTERED AGENT CHANGE

CREDITAMERICA, INC.

Certificate of Status Certified Copy Page Count 01 Estimated Charge \$87.50

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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 : CREDITAMERICA, INC.
2. The mailing address of the corporation: 7308 Pine Forest Circle, Lake Worth, Florida 33467-3906
3. Date of incorporation/qualification: July 15, 1975 Document number: 480568
4. The name and address of the current registered agent and office:
Scott L. Baena
200 S. Biscayne Blvd., Suite 3300
Miami, FL 33131
200 S. Biscayne Blvd., Suite 3300 Miami, FL 33131 5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable) Scott L. Baena, P.A.
Scott L. Baena, P.A.
200 S. Biscayne Blvd., Suite 2500
Miami, FL 33131-2336
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, charman or vice chairman of the board) (Date)
Doubles W. Boeva, ceo
(Printed or typed assuc and title) Having been named as registered agent and to accept service of process for the above stated corporation, I hereby actept the application 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 amfamiliar with and accept the obligation of my position as registered agent. SCOTT L. BAENA, F.A.; a Florida corporation By:
(Signature of Registered Agent) (Date)
f signing on behalf of an entity: Scott L. Baena President
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

Fax Audit No.: H01-17594 Tallahassee, FT. 32314