523383

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Business Entity Name)
(Document Number)
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100, 700103



05/20/03-01031-024 **35.00

)3 MAY 20 PM 4:00 -FICEO ORIDA

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

-	in order to change its registered office or registered agent, or both, in the State
of Florida.	the corporation: DCA Financial Corp.
2. The principal	office address: 700 NW 107 Avenue, Miami, Florida 33172
3. The mailing a	address (if different):
4. Date of incor	poration/qualification: <u>1/28/77</u> Document number: <u>523383</u>
	d street address of the current registered agent and registered office on file with the rtment of State:
	David B. McCain, Esq.
	Miami FL 33172
6. The name a	nd street address of the new registered agent (if changed) and /or regi
changed):	Benjamin P. Butterfield, Esq.
	700 NW 107 Avenue - BA B
	Miami FL 33172

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.

board (Signature of an of the

David B. McCain, Vice 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.

mm IN IL (Signature of Registered Agent)

May 1, 2003 (Date)

If signing on behalf of an entity:

Benjamin P. Butterfield (Typed or Printed Name)

Vice President/Secretary (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