orida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000070963 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number

: (850)617-6380

From: Carrie Ramos, Paralegal please fax confirmation to 407 244-5690 Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : I20010000078

Phone (407)843-8880 Fax Number : (407)244-5690

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please, **

Email	Address:		 	 	-

REGISTERED AGENT CHANGE FINANCIAL AID MANAGEMENT FOR EDUCATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

H15000070963 3

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

statement of	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this change is submitted for a corporation organized under the laws of the State of Florida order to change its registered office or registered agent, or both, in the State of Florida.	-	
	of the corporation: Financial Aid Management For Education, Inc.		
	ipal office address; 6451 N. Federal Highway, Suite 501, Ft. Lauderdale, FL 33308-1488		_
3. The maili	ng address (if different):		<u> </u>
4. Date of in	acorporation/qualification: 9/15/78 Document number: 584779		
	and street address of the current registered agent and registered office on file with the epartment of State: (If resigned, enter resigned)		
	Laura Little		
	6451 N. Federal Highway, Suite 501, Ft. Lauderdale, FL. 33308-1488	15 MAR	RESISTATO
6. The name	and street address of the new registered agent (if changed) and /or registered office ed):	IR 20 AH	THE OF CORPUSAL
	William A. Little		7633A
	6451 N. Federal Highway, Suite 501, Ft. Lauderdale, FL 33308-1488 P.O. Box NOT acceptable	21	303
The street a	ddress of its registered office and the street address of the business office of its registered agwill be identical.	ont,	
Such change authorized b	e was authorized by resolution duly adopted by its board of directors or by an officer so by the board, or the corporation has been notified in writing of the change.		
	William A. Little, President Printed or typed name and sulc	_	
I hereby acc I further ago performance agent. Or, t hereby conf	cept the appointment as registered agent and agree to act in this capacity, ree to comply with the provisions of all statutes relative to the proper and complete e of my duties, and I am familiar with and accept the obligation of my position as registered if this document is being filed merely to reflect a change in the registered office address, I firm that the corporation has been notified in writing of this change.		
	Signature of Registred Agrat Signature of Registred Agrat Date	_	
If signing o	n behalf of an entity:		
	Typed or Printed Name		
	* * * TTT INIC FFF: \$35.00 * * *		