Division of Corporations

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092

Fax Number

; (850)878-5368

**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

AMERICAN GENERAL FINANCE MANAGEMENT CORPORATION

Carifford of Contra	
Certificate of Status	
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu Corporate Filing McaCOULL

NOV 30 2010

EXAMINER

COVER LETTER

	ent Section of Corporations	·					
SUBJECT: American General Figance Management Corporation							
	Name of Cor	poration					
DOCUMENT N	UMBER:8	25457					
The enclosed Stat	sment of Change of Registered Office/	Agent and fee are submitted for filing.					
Please return all c	orrespondence concerning this matter to	o the following:					
	•	_					
	act Person						
	Firm/Com						
	pany						
		•					
	Addres	38					
		· .					
	City/State and	Zip Code					
	thiythe@agfinar	ICE.COM					
-	E-mail address: (to be used for futu						
17au 6							
POF IMPILET INTOFFIE	ation concerning this matter, please call						
		at ()					
Nar	ne of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a \$35.0	0 check made payable to the Departme	nt of State.					
		·					
	Mailing Address: Amendment Section	Street Address:					
		Amendment Section					
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building					
	Tallahassee, FL 32314	2661 Executive Center Circle					
		Tullahassee FI 32301					

CR2E045 (\$/05)

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

	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flo hange is submitted for a corporation organized under the laws of the Stat		_	
	der to change its registered office or registered agent, or both, in the State	of Florida.		
1. The name of	f the corporation: American General Pinance Management Corporation			_
•	al office address: ECOND ST. EVANSVILLE IN 47708			-
3. The mailing	address (if different):			_
4. Date of inco	rporation/qualification: 12/8/1970 Document number:	825457		-
5. The name ac Florida Depa	nd atreet address of the current registered agent and registered office on fil artment of State: (If resigned, enter resigned)	e with the		
	CORPORATION SERVICE COMPANY			
	1201 HAYS STREET TALLAHASSEE FL 32301-2525			
			<u> </u>	
6. The name an (if changed):	d street address of the new registered agent (If changed) and /or registered	l office	HO NOV 30	9
	C T Corporation System			3
	c/o C T Corporation System, 1200 South Pine Island Road		AH S	CHAC
	P.O. Box NOT acceptable		s Ö	3
	Plantation, Plorida 33324		_	STATE OF
The street addr	ess of its registered office and the street address of the business office I be identical.	of its registered agent,		<i>S</i>
	as authorized by resolution duly adopted by its board of directors or b he board, or the corporation has been notified in writing of the change			
	Kimberly Breunling,			
	the appendiment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and id I am familiar with and accept the obligation of my position as registive filed merely to reflect a change in the registered office address, I his been notified in writing of this change.		e 5	
By: , K of the	Corporation System 11/22/201 Delto Delto Dalo Dalo			
_	half of an entity:			
r wegening till De.	Assistant Secretary Rebecca Berth			
Ту	yped or Printed Name			
	* * * FILING FEE: \$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)