848458

(Re	questor's Name)		
(Ad	dress)		
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PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Do	cument Number)		
Certified Copies	Certificates of Status		
Special Instructions to	Filing Officer:		
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SECRETARY OF STATION

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COVER LETTER

Division of Corporations SUBJECT: FIRST COMMAND FINANCIAL SERVICES, INC. (Name of Corporation) DOCUMENT NUMBER: 848458 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: Janice Null (Name of Contact Person) Incorp Services, Inc 375 N. Stephanie St., Suite 1411 (Address) Henderson, NV 89014-8909 (City/State and Zip Code) For further information concerning this matter, please call: 702) 866-2500 ext. 2027 (Area Code & Daytime Telephone Number) Janice Null on behalf of Incorp Services, Inc. (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. **Mailing Address:** Street Address: Amendment Section **Amendment Section Division of Corporations** Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

TO:

Amendment Section

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Stainge is submitted for a corporation organized under the laws of the State of \underline{Te} are to change its registered office or registered agent, or both, in the State of Flor	exas	is	<u>-</u>	
1. The name of t	the corporation: FIRST COMMAND FINANCIAL SERVICES, INC.				_
2. The principal	office address: 1 FIRSTCOMM PLAZA, FT WORTH, TX 76109 US				-
3. The mailing a	address (if different): PO BOX 2387, FT WORTH, TX 76113 US				-
4. Date of incorp	poration/qualification: 03/11/1981 Document number: 848458				- -
	d street address of the current registered agent and registered office on file with rtment of State:	the			
	CAPITOL CORPORATE SERVICES, INC.				
	155 OFFICE PLAZA DR. SUITE A	¥SEC SEC	09		
	TALLAHASSEE FL 32301 US	₹	Œ	T I)	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	SSEE, FI	= 3	ILED	
	Incorp Services, Inc.	SE E	7: 2		
	17888 67th Court North	×m	, CFI		
	(P.O. Box NOT acceptable) Loxahatchee, FL 33470				
The street addre	ess of its registered office and the street address of the business office of its il be identical.	registere	ed age	ent,	
Such change wa	as authorized by resolution duly adopted by its board of directors or by an or he board, or the corporation has been notified in writing of the change.	fficer so	•		
I Must	L Sympton We of an office of director) Hugh A. Simpson (Printed or typed name and title		n	tary	
I hereby accept I further agree of my duties, ar document is be corporation ha	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and comp nd I am familiar with and accept the obligation of my position as registered in ing filed merely to reflect a change in the registered office address, I hereby s been notified in writing of this change.	lete per agent. (confirn	forma Or, if i that	nce this the	
Janice	ignature of Registered Agent) Services, luc. (Date)				
.	ehalf of an entity:				
·	n behalf of Incorp Services, Inc. Typed or Printed Name)				

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

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