

F00000001014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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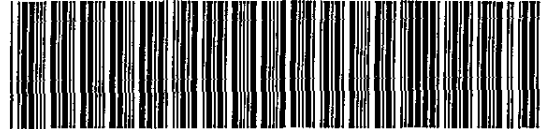
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

C. Ooulette JUN 05 2003

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ALLIGATOR KEY MORTGAGE COMPANY  
(Name of Corporation)

**DOCUMENT NUMBER:** F00000001014

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Natalie Smith  
(Name of Person)

Alligator Key Mortgage Company  
(Name of Firm/Company)

2717 West Cypress Creek Road, Suite 802  
(Address)

Fort Lauderdale, FL 33309  
(City/State and Zip Code)

For further information concerning this matter, please call:

Natalie Smith at ( 954 ) 632-2801  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**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 Florida \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: ALLIGATOR KEY MORTGAGE COMPANY
- 2. The principal office address: 2717 West Cypress Creek Road, Suite 802  
Fort Lauderdale, FL 33309
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 02/25/2000 Document number: F0000001014

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Natalie Smith  
2802 Oakland Park Blvd., Suite 273  
Fort Lauderdale, FL 33311

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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Natalie Smith  
1475 SE 15th Street, Unit 101  
(P.O. Box or personal mailbox NOT acceptable)  
Fort Lauderdale, FL 33316

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.

[Signature]  
(Signature of an officer, chairman or vice chairman of the board)

Natalie Smith, owner  
(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.*

[Signature]  
(Signature of Registered Agent)

5/29/03  
(Date)

If signing on behalf of an entity:  
\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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