

Florida Department of State  
Division of Corporations  
Public Access System

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To:  
Division of Corporations  
Fax Number : (850)617-6380

From:  
Account Name : COMPLIANCE CONSULTING CORPORATION OF FLORIDA  
Account Number : I20010000135  
Phone : (561)586-3645  
Fax Number : (561)586-6335

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2008 JUN -6 AM 11:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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REGISTERED AGENT CHANGE

NFS LOANS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

ASR  
6/9/08

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Corporate Filing Menu

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

1. The name of the corporation: NFS Loans, Inc.
2. The principal office address: 18301 Von Karman, Suite 920, Irvine, CA 92612
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 05/29/2002 Document number: F02000002784

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

Compliance Consulting Corporation of Florida

521 Lake Avenue

Lake Worth, FL 33460

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

Compliance Consulting Corporation of Florida

1013 Lucerne Avenue, Suite 201

(P.O. Box NOT acceptable)

Lake Worth, FL 33460

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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 or director)

Anthony D Perkins, 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.

[Signature]  
(Signature of Registered Agent)

6-6-06  
(Date)

If signing on behalf of an entity:

Jan Martin  
(Typed 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)

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