

JAN. 23. 2009 9:17AM

F02000003889

Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I200000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

REGISTERED AGENT CHANGE

SUPERIOR ASSET MANAGEMENT, INC.

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

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NO. 315 P. 2

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

Pursuant to the provisions of sections 607.0302, 617.0302, 607.1303, or 617.1303, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Georgia
in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Superior Asset Management, Inc.
2. The principal office address: 1000 Abernathy Rd., NE, Bldg 400, Suite 165
Atlanta, GA 30328
3. The mailing address (if different): 1901 West 10th Street, Suite B
Antioch, CA 94509
4. Date of incorporation/qualification: 7/30/02 Document number: F02000003889
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Saxon, Bernice S Esq.

201 E. Kennedy Blvd, Ste. 600

Tampa, FL 33602

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

Corporation Service Company

1201 Hays Street

(P.O. Box NOT acceptable)

Tallahassee, FL 32301

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)

Vikram Negi 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. On 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.

Corporation Service Company

By: Sylvia M. White
(Signature of Registered Agent)

1/23/09
(Date)

If signing on behalf of an entity:

Sylvia M. White
(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

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