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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.\*\*

## REGISTERED AGENT CHANGE DATAQUICK LENDING SOLUTIONS, INC.

Certificate of Status	0
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6/1/2012

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations				
CYTID YES	DATAQUICK LENDING SOLUTIONS, IF	NC.			
SOBJE	SUBJECT:Name of Corporation				
DOCUM	P03000000510				
The encl	losed Statement of Change of Registered Off	fice/Agent and fee are submitted for filing.			
	eturn all correspondence concerning this made	<del>-</del>			
	Name of I	Contact Person			
	Name of C	Annact Person			
Firm/Company					
	Ac	ldress			
	City/State	and Zip Code .			
	LegalLS@dataquick.com	•			
	E-mail address: (to be used for	future annual report notification)			
For furth	er information concerning this matter, please	call:			
	Name of Contact Person	at (at (			
Enclosed	is a \$35,00 check made payable to the Depa				
	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Division of Corporations	Division of Corporations			
	P.O. Box 6327	Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassec, FL 32301			
		i			
CR2E045 (0	3/12)				

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

	DATACHICK FRANK	gistered agent, or both, in the State of Florida.	
The name     The prince	e of the corporation: DATAQUICK LENDI cipal office address: 5300 BRANDYWINE	PARKWAY SUITE 100 WILMINGTON DE 19803	i
3. The mail	ing address (if different);		
4. Date of in	acorporation/qualification: 01/13/2003	Document number: F03000000510	
	e and street address of the current registere repartment of State: (If resigned, enter resi	ed agent and registered office on file with the gned)	
	CORPORATION SERVICE COMPAN	NY .	
	1201 HAYS STREET TALLAHASSEI	E FL 32301-2525	
			<b>5</b>
6. The name	and street address of the new registered and);	gent (if changed) and /or registered office	WISION OF CORPORT
	C T Corporation System		70 70
•	C T Corporation System  c/o C T Corporation System, 1200 South Pine Island Road Plantation,  P.O. Box NOT acceptable		
	P.O. Box N	NOT acceptable	=
	Fiorida 33324	, , , , , , , , , , , , , , , , , , ,	சு
The street ac as changed v	ddress of its registered office and the stre will be identical.	et address of the business office of its registere	d agent,
Such change authorized b	was authorized by resolution duly adopt y the board, or the corporation has been	ted by its board of directors or by an officer so notified in writing of the change.	
- /\)\	Meurine	Ashley Pipes, Vice President	•
	mature of an office of director	Printed or typed name and tills	
I hereby aco I further agr performance agent. Or, h hereby confl	ept the appointment as registered agent of see to comply with the provisions of all st to of my duties, and I am familiar with and f this document is being filed merely to r rm that the corporation has been notified	and agree to act in this capacity, atutes relative to the proper and complete I accept the obligation of my position as registe effect a change in the registered office address, I in writing of this change.	red I
ву:	T Comporation System	5/30/2012	
<u> </u>	Significate of Registered Agent	Dale	
If signing on	behalf of an entity.		
	Typed or Printed Name		

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