

F03000001124

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

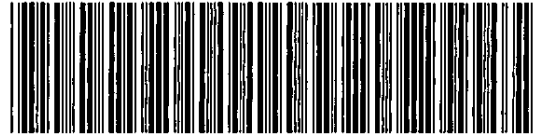
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A. Change

TB

9/23/08

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: EQUIPOINT FINANCIAL NETWORK, INC.  
(Name of Corporation)

DOCUMENT NUMBER: F03000001124

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.  
(Firm/Company)

375 N. Stephanie St., Suite 1411  
(Address)

Henderson, NV 89014-8909  
(City/State and Zip Code)

For further information concerning this matter, please call:

Janice Null/ Incorp Services, Inc. at ( 702 ) 866-2500 ext. 2027  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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

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

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: EQUIPOINT FINANCIAL NETWORK, INC.
2. The principal office address: 3256 PENRYN ROAD 100 LOOMIS CA 95650
3. The mailing address (if different): 33 Via Vera Cruz, Suite 251, San Marcos, CA 92078
4. Date of incorporation/qualification: 03/04/2003 Document number: F03000001124
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

NRAI SERVICES, INC.

2731 EXECUTIVE PARK DRIVE SUITE 4

WESTON FL 33331 US

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

Incorp Services, Inc.

17888 67th Court North

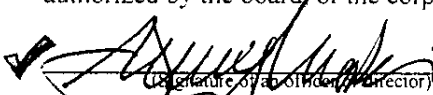
(P.O. Box NOT acceptable)

Loxahatchee, FL 33470

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TALLAHASSEE, FLORIDA

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 of a duly authorized officer)

Lawrence J. Wodarski - Treasurer

(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 of Registered Agent)  
Janice Null on behalf of  
Incorp Services, Inc.

9/15/08  
(Date)

If signing on behalf of an entity:

Janice Null on behalf of Incorp Services, Inc.

(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