F05000001711

(Requestor's Name)
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COVER LETTER

Quick Loan Funding, Inc. SUBJECT: (Name of Corporation) F05000001711 DOCUMENT NUMBER:_ 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: Sabrina Tillapaugh (Name of Contact Person) US CorpWorks Inc. (Firm/Company) 23 Butler Avenue (Address) Maynard, MA 01754 (City/State and Zip Code) For further information concerning this matter, please call: Sabrina Tillapaugh 888) 967.5799 (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. 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

Tallahassee, FL 32301

TO: Amendment Section

Division of Corporations

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

-	<u>-</u>		607.1508, or 617.1508, Flor		
			ed under the laws of the State ed agent, or both, in the State		
The name of the corporation:		Oviale Lana Evantina Inc			
	•	535 Anton Blvd., Ste. 400, Costa Mesa, CA 92626			
3. The mailing ac	ddress (if different):				
4. Date of incorp	oration/qualification:	3/18/2005	Document number:	F05000001711	
5. The name and Florida Depart		rrent registered age	ent and registered office on fi	ile with the	
		NRAI Service	es, Inc.		
	526 East Park Avenue				
		Tallahassee, F	FL 32301	2006 APR	
6. The name and (if changed):	street address of the ne	w registered agent	(if changed) and /or registere	ed office	
		NRAI Servic	es, Inc.	# 9: 31	
	2731 Executive Park Drive, Suite 4				
	(P.O. Box NOT acceptable)				
		Weston, FL			
The street addre as changed will	ss of its registered office be identical.	ce and the street a	ddress of the business office	e of its registered agent,	
Such change wa authorized by th	s authorized by resolute board, or the corpora	tion duly adopted ation has been not	by its board of directors or lified in writing of the chang	by an officer so e.	
(Signatu	re of an officer or director)		(Printed or typed name	ne and title)	
I further agree to of my duties, and document is being	the appointment as reg o comply with the prov d I am familiar with an ng filed merely to refle been notified in wittin	visions of all statu nd accept the oblig ct a change in the	agree to act in this capacit tes relative to the proper an gation of my position as regi registered office address, I	y d complete performance istered agent. Or, if this hereby confirm that the	
Johns	nature of Registered Agent)	:	03/30/06 (Date)		
If signing on be	half of an entity:)			
Sabrina Till	apaugh, Asst. Se	cretary			
/T	vned or Printed Name)	· ·	- WEF EME,	• •	

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