F08000000045

(Re	(Requestor's Name)			
(Ad	dress)			
(Address)				
(City/State/Zip/Phone #)				
	_	_		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
· (Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Coordinates	Fili Offi			
Special Instructions to	Filing Officer:			
	•			
		· ·		

Office Use Only



400136081754

09/22/08--01050--008 **35.00

08 SEP 22 PH 1: 52
SECRETARY OF STATE
VALLAHASSEE, FLORID,

R.A. Charge

SEP 2 6 200

COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJ	ECT: VOYAGE FINANCIAL GROUF	PINC.		
DOC	UMENT NUMBER: F0800000045			
The er	nclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.		
Please	e return all correspondence concerning this matter to	the following:		
	Janice Null (Name of Contact	et Person)		
Incorp Services, Inc. (Firm/Company)				
375 N. Stephanie St., Suite 1411 (Address)				
Henderson, NV 89014-8909 (City/State and Zip Code)				
For fu	urther information concerning this matter, please call	:		
Janio	ce Null on behalf of Incorp Services, Inc (Name of Contact Person)	at (702) 866-2500 ext. 2027 (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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida 3 nge is submitted for a corporation organized under the laws of the State of _ r to change its registered office or registered agent, or both, in the State of F	California
1. The name of t	the corporation: VOYAGE FINANCIAL GROUP INC.	
	office address: 2377 GOLD MEADOW WAY, SUITE 100 SACRAM	ENTO CA 95670
3. The mailing a	ddress (if different):	
4. Date of incorp	poration/qualification; 04/03/2008 Document number: F08000)000045
	I street address of the current registered agent and registered office on file witment of State:	th the
	INCORP. SERVICES, INC.	
	17888 67TH COURT NORTH	_
	LOXAHATCHEE FL 33470 US	- 평
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered of	08 SEP SECRETA
	Incorp Services, Inc.	AR)
	17888 67th Court North	T 32 m
	(P.O. Box NOT acceptable)	11.S
	Loxahatchee, FL 33470	52 RID,
The street address changed will	ess of its registered office and the street address of the business office of it be identical.	ts registered agent,.
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by an ne board, or the corporation has been notified in writing of the change.	officer so
• •	are of an officer or director) (Printed or typed name and	•
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and con id I am familiar with and accept the obligation of my position as registere ng filed merely to reflect a change in the registered office address, I here s been notified in writing of this change.	nplete performance d agent. Or, if this by confirm that the
Janes	enature of Registered Agent) Description of the de	<u> 108</u>
/ / CCU/ L	half of an entity:	
Janice Null or	behalf of Incorp Services, Inc.	
	Typed or Printed Name)	

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