

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F08000002157

**FILED**  
**Oct 17, 2009**  
**Secretary of State**

**Entity Name:** OUTSOURCE FINANCIAL SERVICES OF COLORADO, INC.

**Current Principal Place of Business:**

10885 E 51ST AVE  
DENVER, CO 80237

**New Principal Place of Business:**

10885 E 51ST AVE  
DENVER, CO 80239

**Current Mailing Address:**

PO BOX 5172  
DENVER, CO 802175172

**New Mailing Address:**

PO BOX 5172  
DENVER, CO 80217

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

COSCULLUELA & MARZANO, P.A.  
14211 COMMERCE WAY SUITE 300  
MIAMI LAKES, FL 33016 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL COSCULLUELA

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CP ( ) Delete  
Name: MARCOVE, SAMUEL L  
Address: 10885 E 51ST AVE  
City-St-Zip: DENVER, CO 80237

Title: VCVP ( ) Delete  
Name: MARCOVE, SAMUEL L  
Address: 10885 E 51ST AVE  
City-St-Zip: DENVER, CO 80237

Title: ST ( ) Delete  
Name: SUAREZ, FELIPE  
Address: 10885 E 51ST AVE  
City-St-Zip: DENVER, CO 80237

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: MARCOVE, SAMUEL L  
Address: 10885 E 51ST AVE  
City-St-Zip: DENVER, CO 80239

Title: VCVP (X) Change ( ) Addition  
Name: MARCOVE, BOBETTE  
Address: 10885 E 51ST AVE  
City-St-Zip: DENVER, CO 80239

Title: ST (X) Change ( ) Addition  
Name: SUAREZ, FELIPE  
Address: 10885 E 51ST AVE  
City-St-Zip: DENVER, CO 80239

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FELIPE SUAREZ

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

ST

10/17/2009

\_\_\_\_\_  
Date