

FD80000002185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

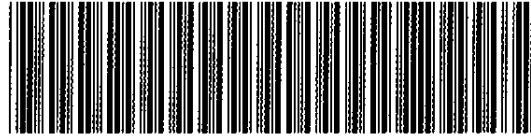
(Document Number)

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08 MAY 27 AM 11:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Roberts JUN 03 2008

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** TMC Lending, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** F08000002185

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:

Steve Hoffman  
(Name of Contact Person)

TMC Lending, Inc.  
(Firm/Company)

975A Russell Avenue  
(Address)

Gaithersburg, MD 20879  
(City/State and Zip Code)

For further information concerning this matter, please call:

Steve Hoffman at ( 240 ) 246-0800  
(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 Maryland in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TMC Lending, Inc.
2. The principal office address: 975A Russell Ave., Gaithersburg, MD 20879
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 5/14/2008 Document number: F08000002185

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Steven H Hoffman

2840 Boat Cove Circle

Kissimmee, FL 34746

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

Steve Hoffman

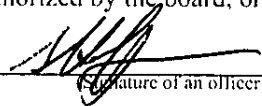
2840 Boat Cove Circle

(P.O. Box NOT acceptable)

Kissimmee, FL 34746

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

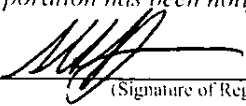
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer or director)

Steve Hoffman, President

(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)

05/22/2008

(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(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

CR2E045 (8/05)

FILED  
08 MAY 27 AM 11:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA