F090000001671

(Requestor's Na	me)			
(Address)	_			
(Address)				
(City/State/Zip/P	Phone #)			
PICK-UP WAIT	Г MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certified	cates of Status			
Special Instructions to Filing Officer:				

Office Use Only



800259954838

Cherry

800259954838 05/07/14--01024--002 **35.00



16/14 5/16/14



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: May 5, 2014

Order#: 112907-005

Re: CREDIT AND DEBT ASSISTANCE CENTER OF AMERICA INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Morgan Kennedy

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	nge is submitted for a corporation or r to change its registered office or re	0502, 607.1508, or 617.1508, Florida Sta ganized under the laws of the State of <u>CF</u> gistered agent, or both, in the State of Flo	A prida.	
1. The name of t	he corporation: CREDIT AND DEBT	ASSISTANCE CENTER OF AMERICA,	INC.	
• •	office address: NIDA EMPRESA STE 235RANCHO	SANTA MARGARITA CA 92688		
	ddress (if different): 80777, RANCHO SANTA MARGAR	ITA, CA 92688		
4. Date of incorp	poration/qualification: 07/02/2009	Document number: F09000002	2671	
	I street address of the current registere timent of State: (If resigned, enter resigned)	ed agent and registered office on file with igned)		
	NRAI SERVICES, INC.	5	香兰	
	1200 SOUTH PINE ISLAND ROAD	,		
	Plantation	FL 33324	HED -1	
NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD Plantation FL 33324 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Corporation Service Company		T T	
	1201 Hays Street			
	P.O. Box Tallahassee	NOT acceptable FL 32301		
		eet address of the business office of its r		
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.				
	re of an officer or director	Dona Priebe, Vice President		
I hereby accept I further agree of performance of agent. Or, if the hereby confirm	the appointment as registered agent to comply with the provisions of all s my duties, and I am familiar with ar	and agree to act in this capacity. Statutes relative to the proper and completed accept the obligation of my position are reflect a change in the registered office of	s registered	
By: Drag	a Co-Kuble	05/02/2014		
~	nature of Registered Agent half of an entity:	Date		
Grace E. Kirby	•			
T	yped or Printed Name			

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