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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: AFG Premium Finance, Inc.

Name of Corporation

DOCUMENT NUMBER: F10000001885

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:

Dominique Ward, Esq.

Name of Contact Person

Law Office Dominique Ward, PLLC

Firm/Company

2708 Commerce Way, Suite 101

Address

Philadelphia, PA 19154

City/State and Zip Code

avangardlegal@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dominique Ward

__954

536-3539

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

| statement of cha | ange is submitted for a corporation | 17.0502, 607.1508, or 617.1508, Florid organized under the laws of the State of registered agent, or both, in the State of | f Delware | | _ |
|--|---|--|-------------|--------------------|-----------------------------------|
| 1. The name of | the corporation: AFG Premiur | m Finance, Inc. | | | |
| 2. The principal | office address: 2708 Comme | erce Way, Suite 300, Philade | ∍lphia, F | PA 1 | 9154 |
| 3. The mailing a | address (if different): | | | | |
| 4. Date of incor | poration/qualification: 02/09/20 | Document number: F100 | 000018 | 385 | |
| 5. The name and | | tered agent and registered office on file | with the | | |
| - | Linda Friedman - Algr | 1 Gulko | _ | | |
| | 17555 Collins Avenue, | Unit 3501 | | | |
| | Sunny Isles Beach, FL | 33160 | _ | | |
| 6. The name and (if changed): | d street address of the new register | ed agent (if changed) and /or registered | office SET | 14 JAN | |
| | Ella Friedman | | - (A) | $\frac{\omega}{2}$ | underdreiser 12 stantiser 2 |
| 17555 Collins Avenue, Unit 3501 | | — ¬ | 7 | 3 6 8 | |
| | Sunny Isles Beach, FL | ox NOT acceptable 33160 | | 9S.¥ | (Same |
| The street address changed will | ess of its registered office and the be identical. | street address of the business office of | its registe | | ent, |
| | ∠ 1 | dopted by its board of directors or by a een notified in writing of the change. | | | |
| X. Man | re of an office or director | Emil Finites Chairs | MA & Pro | :siden | t |
| I hereby accept I further agree performance of agent. Or, if th hereby confirm | the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been not | ent and agree to act in this capacity. Il statutes relative to the proper and co and accept the obligation of my positi to reflect a change in the registered off ified in writing of this change. | | | |
| Sig | Of du fun- nature of Registered Agent | January 14,2014 | | | |
| - | shalf of an entity: | | | | |
| | nium France Inc. yped or Printed Name | | | | |

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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