(1/4)

Division of Corporations

# Page 1 of 1

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850) 222-1092

: (050)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Rmail Address:

### REGISTERED AGENT CHANGE PRONTO MONEY TRANSFER INC.

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DEC 11 2014

12/10/2014

## COVER LETTER

TO: Amendment Section Amendment Sectin Amendment Section Amendment Section Amendment Section Amendment
PRONTO MONEY TRANSFER INC. SUBJECT:
Name of Corporation
DOCUMENT NUMBER:
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:
Claudia Urjel
Name of Contact Person
PRONTO MONEY TRANSFER INC.
Firm/Company
111. N. SEPULVEDA BLVD., SUITE 340
Address
MANHATTAN BEACH, CA 90266
City/State and Zip Code
claudiaurjel@pontualmt.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:  Claudia Urjel 310 698-0164
Name of Contact Person al ( Area Code & Daytime Telephone Number
Name of Contact Person
Enclosed is a \$35.00 check made payable to the Department of State.
Malling Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address: Amendment Section Division of Corporations Clitton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (03/12)

ADA , ALPARANI S Wallow Phones Publica

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

Pursuant to the statement of ch	e provisions of sections 607.0502, ( aange is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, this or organized under the laws of the State of California		
in ora	er to change its registered office of	r registered agent, or both, in the State of Florida.		
I. The name of	The corporation; PRONTO MONEY	Y TRANSFER INC.		
2. The principa	al office address:	HATTAN BEACH, CA 90266		
111. N. SEP	ULVEDA BLVD., SUITE 340 MAN	HATTAN BEACH, CA 90266		<del>- ·</del>
3. The mailing	address (if different):	. 4.6		
4. Date of inco	rporation/qualification: 01/24/2012	Document number; F12000000337	<u> </u>	_
5. The name an Florida Depart	nd street address of the current reginariment of State: (If resigned, enter	stered agent and registered office on file with the resigned)		
	REGISTERED AGENT SOLUTION	ONS, INC.	4	
	155 OFFICE PLAZA DR SUITE A	4	14 DEC	
	TALLAHASSEE, FL 32301	- A first grade of the day	0.1	
6. The name are (if changed):	nd street address of the new register	red agent (if changed) and /or registered office	AM 9:	
	C T Corporation System	· ?	=	
	c/o C T Corporation System, 1290;	South Pine Island Road		
	P.O.	Box NOT acceptable		
	Plantation, Florida 33324	· · · · · · · · · · · · · · · · · · ·		
The street add	ress of its registered office and the	e street address of the business office of its registered ag	gent,	
		adopted by its board of directors or by an officer so seen notified in writing of the change.		
aumorized by	ble dourd, or the corporation has b			
Signal	Gure of an officer or director	Tristan Emrich Printed or typed name and little	<del>-</del>	
I hereby accept further agree performance of agent. Or, if it hereby confirm	of the appointment as registered at to comply with the provisions of if my duites, and I am familiar with his document is being filed merely in that the corporation has been no	gent and agree to act in this capacity, all statutes relative to the proper and complete h and accept the obligation of my position as registered to reflect a change in the registered office address, I olified in writing af this change.	ł	
	Appration System	12/08/2014		
Si	gnature of Registered Agent	Date		
If signing on b	ehalf of an entity:	197 1989 - 1980		
<del></del>	Tuned or Bright Name	The state of the s		
	Typed or Printed Name ** * FILI)	18/19/19/09/ NG FEE: \$35,00 * * *		
	*******	time a marie database		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

#### **POWER OF ATTORNEY**

NOTICE IS HEREBY GIVEN THAT PRONTO MONEY TRANSFER INC. ("Corporation"), a corporation incorporated under the laws of the State of California, does hereby appoint, Melissa Zanoletti, David Stephani, Donald Boadway and Tristan Emrich employees of CT Corporation and acting solely in the capacity as employees of CT Corporation, as attorney-in-fact for the Corporation to act for the Corporation and in the Corporation's name for the limited purposes authorized herein.

The Corporation, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute the documents necessary to change the Corporation's registered agent and registered office, or the agent and office of similar import, in any state to CT Corporation, as directed and authorized by the Corporation.

In the execution of any documents necessary for the sole, limited purpose, set forth herein, Melissa Zanoletti, David Stephani, Donald Boadway and Tristan Emrich shall exercise the power of Vice President, Secretary, Manager, and/or Member.

This Power of Attorney expires when revoked by the undersigned

IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this

12/5/2014.

PRONTO MONEY TRANSFER I

A California Corporation

By: Name: Flavio Schafinovitch

Title: Vice-President

State of CA

County of Los Angeles

On 12/5/2014 before me, the undersigned, a Notary Public in and for said State, personally appeared Flavio Schafirovitch – Vice-President personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me he/she/they executed the same in his/her/their authorized capacity (ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed this instrument.

Witness my hand and official seal.

Swoon fe thini Notary Public