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To:

Division of Corporations

Fax: Number (850) 617-6380

From:

Account Name : SHUTTS & BOWEN LLP OPERATING ACOUNT

Account Number: I20030000037 Phone

: (561)835-8500

Fax Number

: (561)650-8530

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

## REGISTERED AGENT CHANGE MULTI FUNDING USA, INC.

Certificate of Status 0 Certified Copy 0 Page Count 01 Estimated Charge \$35.00 S TALLENT

MAY 04 2017

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## 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 Florida	
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Multi Funding USA, Inc.	
2. The principal office address: 201 Hurley Avenue, Kingston, NY 12401	
	_
3. The mailing address (if different): PO BOX 4444, Kingston, NY 12402	-
4. Date of incorporation/qualification: 3/22/2013 Document number: F13000001276	_
<ol><li>The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)</li></ol>	
NRAI Services Inc.	
1200 S. Pine Island Road	;
Plantation, Florida 33324	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Bradley Winston c/o Winston Law Firm	
2924 Davie Road, Suite 201	
PO. Box NOT acceptable Fort Lauderdale, Florida 33314	
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.	
Jerry Fastman, CEO 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.	
5-1-2017	
Sensiture of Registered Agent Date	
If signing on behalf of an entity:	
Bradley Winston Typed or Printed Name	
* * * FILING PEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)