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(Requestor's Name)

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(Business Entity Name)

(Document Number)

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DIVISION OF REGISTRATION

*RA. Chong*

C. Coulliette JAN 18 2006

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

First

Midwest Financial

- \_\_\_\_\_ Art of Inc. File\_\_\_\_\_
- \_\_\_\_\_ LTD Partnership File\_\_\_\_\_
- \_\_\_\_\_ Foreign Corp. File\_\_\_\_\_
- \_\_\_\_\_ L.C. File\_\_\_\_\_
- \_\_\_\_\_ Fictitious Name File\_\_\_\_\_
- \_\_\_\_\_ Trade/Service Mark\_\_\_\_\_
- \_\_\_\_\_ Merger File\_\_\_\_\_
- ✓ \_\_\_\_\_ Art. of Amend. File\_\_\_\_\_
- \_\_\_\_\_ RA Resignation\_\_\_\_\_
- \_\_\_\_\_ Dissolution / Withdrawal\_\_\_\_\_
- \_\_\_\_\_ Annual Report / Reinstatement\_\_\_\_\_
- \_\_\_\_\_ Cert. Copy\_\_\_\_\_
- \_\_\_\_\_ Photo Copy\_\_\_\_\_
- \_\_\_\_\_ Certificate of Good Standing\_\_\_\_\_
- \_\_\_\_\_ Certificate of Status\_\_\_\_\_
- \_\_\_\_\_ Certificate of Fictitious Name\_\_\_\_\_
- \_\_\_\_\_ Corp Record Search\_\_\_\_\_
- \_\_\_\_\_ Officer Search\_\_\_\_\_
- \_\_\_\_\_ Fictitious Search\_\_\_\_\_
- \_\_\_\_\_ Fictitious Owner Search\_\_\_\_\_
- \_\_\_\_\_ Vehicle Search\_\_\_\_\_
- \_\_\_\_\_ Driving Record\_\_\_\_\_
- \_\_\_\_\_ UCC 1 or 3 File\_\_\_\_\_
- \_\_\_\_\_ UCC 11 Search\_\_\_\_\_
- \_\_\_\_\_ UCC 11 Retrieval\_\_\_\_\_
- \_\_\_\_\_ Courier\_\_\_\_\_

Signature

Requested by:

SW

1/18

Name

Date

Time

Walk-In

Will Pick Up

# 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, the undersigned corporation organized under the laws of the State of Nebraska submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Midwest First Financial, Inc.

2. The mailing address of the corporation: 11904 Arbor St., Ste 200  
Omaha, NE 68144

3. Date of incorporation/qualification: 9/17/1992 Document number: \_\_\_\_\_

4. The name and address of the current registered agent and office:

Your Capital Connection, Inc.  
417 E. Virginia St., Ste 1  
Tallahassee, FL 32301

5. The name and address of the new registered agent (if changed) and/or registered office (if changed) (P. O. Box Not Acceptable)

Your Capital Connection, Inc.  
417 E. Virginia Street, Suite 1  
Tallahassee, FL 32301

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.

William B. Preston  
(Signature of an officer, chairman or vice chairman of the board)

12/15/05  
(Date)

William B. Preston President  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Leilani White  
(Signature of Registered Agent)

1/18/05  
(Date)

If signing on behalf of an entity:

Leilani White Registered Agent  
(Typed or Printed Name) (Capacity)

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