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10:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C I CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

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

Bermail Address:\_\_

## REGISTERED AGENT CHANGE NEXT FINANCIAL GROUP, INC.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$35.00 |

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

| statement of change is submitted for a corporation orge ————————————————————————————————————  | mized under the laws of the State of Virginia   |
|---|---|
| 1. The name of the corporation: Next Financial Group. !   |   |
| No change   |   |
| 3. The mailing address (if different):  |   |
| 4. Date of incorporation/qualification: 05/17/1999  |   |
| 5. The name and street address of the current registered Florida Department of State: (If resigned, enter resigned)   | agent and registered office on file with the  |
| CORPORATION SERVICE COMPAN  | Y   |
| 1201 HAYS STREET  |   |
| TALLAHASSEE, FL 32301-2825  |   |
| 6. The name and street address of the new registered ag (if changed):   | ent (if changed) and /or registered office  |
| C T Corporation System  |   |
| 1200 South Pine Island Road   |   |
|   | NOT acceptable  |
| Plantation, Florida 33324   |   |
| The street address of its registered office and the street as changed will be identical.  | et address of the business office of its registered agent,  |
| Such change was authorized by resolution duly adopt authorized by the board, or the corporation has been i  | ed by its board of directors or by an officer   |
| /s/ Robert S. Hatfield III Signature of an officer or director  | Robert S. Hatrield III. Assistant Sperdiary   |
| I hereby accept the appointment as registered agent of I further agree to comply with the provisions of all stood my duties, and I am familiar with and accept the oldocument is being filed merely to reflect a change in a corporation has been notified in writing of this chang | and agree to act in this capacity.  The second of the proper and complete performance of the properties of the |
| Sex Chaine  |   |
| Signature of Registered Agent   | Date AHA  |
| If signing on behalf of an entity:  | 2 S S S S S S S S S S S S S S S S S S S   |
| SEAN L. EMERICK, ASSISTANT SECRETARY  Typed or Printed Name   | المارية   |
| ••  | FEE: \$35.00 * * *  |

By: