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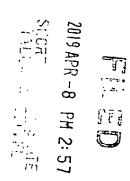
(Requestor's Name)						
(Address)						
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(City/	State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
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(Document Number)						
Certified Copies	Certificate	s of Status				
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R. WHITE

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	FOCUS FINANCE, L.L.C.					
	·	e of Limited I	iability Company			
Dear S	ir or Madam:					
The en	iclosed Registered Agent/Registered Offi	ce Change and	I fee(s) are submitted for filing.			
Please	return all correspondence concerning thi	s matter to the	following:			
Steve	en C. Elkin					
	Name of Person					
Frank	k Weinberg Black					
	Firm/Company					
7805	S.W. 6th Court					
	Address		_			
Plant	ation, FL 33324					
	City/State and Zip Code		_			
selkir	n@fwblaw.net					
E	-mail address: (to be used for future ann	ual report noti	fication)			
For fu	rther information concerning this matter,	please call:				
Steve	en C. Elkin	954	474-8000			
	Name of Person		Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:						
	■ \$25 Filing Fee	□ s	55 Filing Fee & Certified Copy			
INHSI	8 (2/14)					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: Focus Fina	ınce, L.L	C		
2. (a)	1300 Sawarass Corporate Parkway		(b)	1300 Sa	awgrass Corporate Parkway
(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		()		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Suite 300			Suite 30	0
	Sunrise, FL 33323			Sunrise	FL 33323
	07/31/2000		I	_000000	09053
3. 5. (a)	Date of filing/registration in Florida Amy J. Galloway	4.	-		Document number
J. (u.,	Registered Agent and Registered Office shown on the records 3020 N.E. 32 Avenue	s of the Flor	rida	Dept. of Stat	– c:
	Registered Office Address Suite 226	ET ADDRE	<u>:SS</u>	!	_
	Ft. Lauderdale	FL_3330	8		2019 SEC
(b)	Steven C. Elkin				- T
	Enter name of NEW Registered Agent and/or NEW Register	red Office	ado	iress:	&
	Frank Weinberg Black				
	NEW Registered Office Address:				- ;; ;; ;; ;; ;; ;; ;; ;; ;; ;; ;; ;; ;;
	7805 S.W. 6th Court				. r. 7
	Plantation	FL_333	24		
the charge was/w the art	limited liability company is not organized under the large or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the florida limited in the case of a member of a member or authorized representative of a member of all statutes relative to the proper and compilingations of my position as registered agent as provedly reflect a change in the registered office address	s of the red liability ars of the limite	gis co lim d l	stered office impany, it ited liability con the control of the con	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany. Validate Lack Printed or typed name of signee
notifie	d in writing of this change.	-		,	, , , , , , , , , , , , , , , , , , , ,

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent