L0300000671

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300021031633

06/30/03--01059--018 **35.00

2003 SEP -8 AM 9: 03

TRANSMITTAL LETTER

SUBJECT: ALPHA FINANCIAL GROUP LLC & AFG-I, LLC (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:
CHARLES T. SANTOS (Name of person)
AFG, LIC & AFG 1, LLC (Name of firm/company)
12071 FAMBRIDGE RO. (Address)
ORCANDO, FC 32837 (City/state and zip code)
For further information concerning this matter, please call:
CHARCES SANTOS at (407) 240 - 1536 (Name of person) (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section Division of Corporations

TO:

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 9, 2003

CHARLES T. SANTOS AF GROUP I, LLC 12071 FAMBRIDGE RD. ORLANDO, FL 32837

SUBJECT: AF GROUP I, LLC Ref. Number: L03000000671

We have received your document for AF GROUP I, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 003A00040663

Joey Bryan Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 21, 2003

CHARLES T. SANTOS AF GROUP I, LLC 12071 FAMBRIDGE RD. ORLANDO, FL 32837

SUBJECT: AF GROUP I, LLC Ref. Number: L03000000671

Please accept our apology for failing to mention this in our previous letter.

You completed forms for corporations not limited liability companies.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 303A00042441

Joey Bryan Document Specialist AND SERVICE TO SERVICE

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: AF GROUP I, LLC
2. The mailing address of the limited liability company is: 1207/ FAMBRIDGE RD.
ORCANDO, FC 32837
1/8/03
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
THE BUSINESS LAW GROUP Name See E.
Name VIS S. ORANGE ANE. SWITE 500 Address City, State and Zip
6. The name and address of the new registered agent and/or office:
12071 FAMBRIDGE RD
Florida street address (P.O. Box NOT acceptable)
ORCANDO FL 32837
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
(Signature of a member or authorized representative of a member)
CHARGE T. SANTOS (Printed or typed name of signee)
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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the timited liability company has been notified in writing of this change.
(Signature of Registered Agent)
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18(10/99)