## 104000093720

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	usiness Entity Name)
·	Certificates of Status
Special Instructions to	Filing Officer:

Office Use Only



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17 JUL 11 PM 2: 41
DEPARTOR CORPORATION

O7 JUL 11 AM 8: 26
SECRETARY OF STATE
TALLAHASSEF FISHIE



ACCOUNT NO. : 072100000032		
REFERENCE : 986885 7404975 20 2		
AUTHORIZATION: Spelle man		
COST LIMIT : \$ 25.00		
ORDER DATE : July 9, 2007		
ORDER TIME: 1:09 PM		
ORDER NO. : 986885-010		
CUSTOMER NO: 7404975		
CHANGE OF AGENT		
NAME: FINANCIAL SERVICES OF SOUTHWEST FLORIDA, LLC.		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY  XX PLAIN STAMPED COPY		
CONTACT PERSON: Joyce Markley EXT# 2930		
EXAMINER:		

## 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: Financial Services of Southwest Florida, LLC
2.	The mailing address of the limited liability company is:
	234 Colonial Boulevard, Fort Myers, 33907
1	2/28/2004 L.04000093720
	<u>2/28/2004</u> <u>L04000093720</u> Date of filing/registration in Florida 4. Document number
	The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
	David Koeninger
	Name
	2234 Colonial Blvd.
	Address PS 9
	Fort Myers, FL 33907 City, State and Zip
	City, State and Zip
6.	The name and address of the new registered agent and/or office:
	Corporation Service Company Name
	1201 Hays Street
	Florida street address (P.O. Box NOT acceptable)
	Tallahassee FL 32301
	City, State and Zip
co an lia of or	the limited liability company is not organized under the laws of the State of Florida, it is hereby infirmed that after the change or changes are made, the Florida street address of the registered office of the business office of the registered agent will be identical. Or, in the case of a Florida limited bility company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote the members of the limited liability company or as otherwise provided in the articles of organization the operating agreement of the limited liability company.  The provided in the articles of organization and the company of a member of a member of a member or authorized representative of a member)
	David M. Koeninger
(Pı	inted or typed name of signee)
11	nereby accept the appointment as registered agent and agree to act in this capacity. I further agree to apply with the provisions of all statutes relative to the proper and complete performance of my duties, if I am familiar with and accept the obligations of my position as registered agent as provided for in apper 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office these. I hereby confirm that the limited liability company has been notified in writing of this change.
(Si	gnature of Registered Agent)  Joyce L. Markley as its agent
	Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
	FILING FEE: \$25.00