## 106000087745

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**EXAMINER** 



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SECRETARY OF STATE TALLAHASSEE, FLORIDA

## **COVER LETTER**

то:	Registration Section Division of Corporation	ıs		í
SUBJ	ECT:	Association Financial Services, L.C.		
		Name of Limited	l Liability Company	
Dear S	Sir or Madam:			
The er	nclosed Registered Agent	t/Registered Office	Change and fee(s) are submit	ted for filing.
Please	return all correspondence	e concerning this m	atter to the following:	
<u>.</u>	Jeffrey M. Os	hinsky, Esq.		
	Name of Pe	erson		
	Association Financ			
	Firm/Comp	any		
	4400 Biscayne Bou Address	levard, Suite 550		
	Miami, FL City/State and 2			
E-1	joshinsky@; mail address: (to be used for futu	afsic.com re annual report notificatio	n)	
For fur	ther information concern	ing this matter, plea	se call:	
	Jeffrey M. Oshinsky,	Esq. at (	305 ) 677-0022	ext. 806
	Name of Person		Area Code & Daytime Teleph	one Number
	STREET/COURIER AD	ndece.	MAILING ADDRESS:	
	Registration Section	DRESS:	Registration Section	
	Division of Corporations		Division of Corporations	
	Clifton Building		P.O. Box 6327	
	2661 Executive Center Cir	cle	Tallahassee, Florida 32314	
	Tallahassee, Florida 32301			
	Enclosed is a check for	the following amo	unt:	
[	✓ \$25 Filing Fee		\$55 Filing Fee & Certific	ed Copy

## 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.

Name of the limited liability company:	Association Financial Services, L.C.				
2. (a) Principal office address of limited liability	company: 4400 Biscayne Boulevard				
(Note: MUST BE STREET ADDRESS)	Suite 550 Miami, FL 33137				
(b) Mailing address of limited liability compar	ny: 4400 Biscayne Boulevard				
(Note: MAY BE POST OFFICE BOX)	Suite 550 Miami, FL 33137				
09/06/2006	L06000087745				
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
Registered Agent:	Jeffrey M. Oshinsky, Esq.				
Registered Office Address:	Stearns Weaver Miller et al.  150 W. Flagler Street, Suite 2200  Miami, FL 33130				
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:					
NEW Registered Agent:	Jeffrey M. Oshinsky, Ese 5				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRE	SS) Suite 550 SFL23137				
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					
Alexander Moskovitz					
Printed or typed name of signee					
- WHISHS	ent and agree to act in this capacity. I further agree to the proper and complete performance of my duties, of my position as registered agent as provided for in ed to merely reflect a change in the registered office 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**