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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
	ORING & FINANCING, LLC d Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	
Please return all correspondence concerning this m	SECRULAR SEC
MARCEL D. FERAUD	
Name of Person	
ECUADOR LAW, LLC	
Firm/Company	
MIAMI, FL 33133 City/State and Zip Code	
MARCELFERAUD@YAHOO.COM E-mail address: (to be used for future annual report notification for further information concerning this matter, please	
MARCEL D. FERAUD at (305) 773 6740 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 amo	ount:
\$25 Filing Fee	\$55 Filing Fee & Certified 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.

1. Name of the limited liability company: HARTFO	RD FACTORING & FINANCING, LLC
2. (a) Principal office address of limited liability compa	any: 201 S BISCAYNE BLVD
(Note: MUST BE STREET ADDRESS)	SUITE 905 MIAMI, FL 33131
(b) Mailing address of limited liability company:	201 S BISCAYNE BLVD
(Note: MAY BE POST OFFICE BOX)	SUITE 905 MIAMI, FL 33131
07/29/2010	L10000079904 22
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:
Registered Agent:	ROTH, LEONARDO A
Registered Office Address:	201 S BISCAYNE BLVD
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW Registered Agent</u> :	IEW Registered Office address: ECUADOR LAW, LLC
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3669 POINCIANA AVE. 4-A MIAMI ,FL33133
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as other the operating agreement of the limited liability company. Signature of a member of authorized representative of a member	e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote herwise provided in the articles of organization
IVAN VINICIO JARAMILLO ARGUELLO MGR	
Printed or typed name of signee	<u> </u>
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability compositions of Registered Agent Division of Corporations, P.O. Box	proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.

FILING FEE: \$25.00

INHS18 (05/08)