## L150000 35395

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SECRETARY OF STATI TALLAHASSEE, FLORID



## COVER LETTER

Division of Corporations						
SUBJECT: FLORIDA RAPID CASH, LLC						
Name of Limited	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Change ar	nd fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the	ne following:					
Willian D. Eason Name of Person						
Florida Rapid Cash LLC Firm/Company						
13601 Preston Rd Suite Address	415W					
Dallas, Tx 75240  City/State and Zip Code						
beason @ txtitleloans. net  E-mail address: (to be used for future annual report no	otification)					
For further information concerning this matter, please call:						
Bill Eason at 46 Name of Person	Area Code & Daytime Telephone Number					
Registration Section Division of Corporations Clifton Building	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	\$55 Filing Fee & Certified Copy					

INHS18 (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.	Na	me of the limited liability company: FLORIDA RAP	ID C	ASH, LLI	<u>.c</u>
2.		6750 N. ANDREWS AVE SUITE 200			751 STATE HWY 198 S
	<b>(</b> )	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		LAUDERDALE, FL 33309	_	MAE	BANK, TX 75156
		02/25/2015		L1500	00035395
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	MITCHELL, GREGG			<u></u>
		Registered Agent and Registered Office shown on the records of t	the Flor	rida Dept. o	of State:
		6750 N. Andrews Ave			
		Registered Office Address (MUST BE FLORIDA STREET A	ce Address (MUST BE FLORIDA STREET ADDRESS)		QD_
					AEC <b>3</b>
		Fort Lauderdale , FL		33309	APR -4 CRETARY LAHASSE
					TARR ASS
	(b)	InCorp Services, Inc.			ARY OF S
		Enter name of NEW Registered Agent and/or NEW Registered	Office	address:	
		47000 67th Court North			STAT ORI
		17888 67th Court North  NEW Registered Office Address			IDA IS
		THE PROPERTY OF THE PARTY OF TH			
		Loxahatchee , FL	·	33470	
the ag wa	e cha ent v is/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the reability of the	gistered of company limited list	office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in
	_	Man Jasen		Wil	Printed or typed name of signee
	_	fure of a member or authorized representative of a member			
prothe to	herei ovisi e obl mere tified	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, 1 I d in writing of this change.	ee to perfo d for t hereb	act in this rmance o n Chapte v confirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed a that the limited liability company has been
1	M	Matalie Bales on be	half o	f Incorp	Services, Inc.
Si	gnatu	re of Registered Agent		•	