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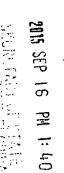
(Re	equestor's Name)						
(Ac	ddress)						
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(Ci	ty/State/Zip/Phon	e #)					
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
	ocument Number)	<u>.</u>					
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N. Congan, Car Lift Earli

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJECT: CFG Loans & Investments LLC Name of Limited Liability Company						
The e	nclosed Registered Agent/Registered Offi	ce Change and fe	ee(s) are submitted for filing.			
Please	e return all correspondence concerning thi	s matter to the fo	llowing:			
Carlo	os Gallego					
	Name of Person		-			
CFG	Loans & Investments LLC					
	Firm/Company		-			
1393	31 Timberland Drive # 101					
	Address	····	=			
Orla	ndo, FL 32824					
	City/State and Zip Code	=	_			
Felip	oe_06@yahoo.com					
	E-mail address: (to be used for future ann	ual report notific	ation)			
For fu	urther information concerning this matter,	please call:				
Carl	os Gallego	917 at (474-1290			
	Name of Person		Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Divi P.O.	ILING ADDRESS: istration Section sion of Corporations Box 6327 ahassee, Florida 32314			
Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy			
INHS	18 (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. N	lame of the limited liability company: CFG Loans	& Investment	ls LLC 			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
3.	March 24, 2015 Date of filing/registration in Florida	L.150	000052645 Document number			
5. (a	Carlos Gallego					
<i>5.</i> (a	Registered Agent and Registered Office shown on the records Rosa Gallego Registered Office Address (MUST BE FLORIDA STREE		of State:	2015		
	127 Meriwood Drive	1 ADDKESS)		HE SE		
		FL_34743		a Time		
(b)	Carlos Gallego Enter name of NEW Registered Agent and/or NEW Register	red Office address:		1: 40 0:00 0:00 0:00 0:00 0:00 0:00 0:00		
	NEW Registered Office Address:					
	13931 Timberland Drive #101	· · · · · · · · · · · · · · · · · · ·				
	Orlando	FL_32824				
the cl agent was/v the ar	limited liability company is not organized under the hange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member rticles of organization or the operating agreement of the formula of the company of the co	of the registered lliability compa is of the limited he limited liabil	d office and the business of ny, it is hereby confirmed to liability company or as other ity company.	fice of the registered hat the change(s) erwise provided in		
	nature of a member or authorized representative of a member		Printed or typed name of	_		
I her provi the o to me notifi	reby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple bligations of my position as registered agent as provi prely reflect a change in the registered office address, ted in writing of this change.	agree to act in the ete performance ided for in Chap I hereby confir	his capacity. I further agree of my duties, and I am fam ter 605, F.S. Or, if this doc m that the limited liability c	e to comply with the iliar with and accept sument is being filed company has been		
Signs	attive of Registered Agent					

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00