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SECRETASY OF STATE

## 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	undersign	ied limited
liability company submits the following agent, or both, in the State of Florida.	statement in	order to	change	its registere	d office or	registered
agent, or both, in the State of Florida.			•	ŭ	00	ŭ

1. The nan	e of the limited liab	ility company is:	Service First	Mortgage,	L.C.
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2. The mailing address of the limited liability company is: 11555 Heron Bay Blvd., Suite 301,

Coral Springs, FL., 33076

4/5/1999

## L99000002038

3. Date of filing/registration in Florida

- 4. Document number
- 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Name
1801 N. Military Trail, Suite 200
Address
Boca Raton, FL. 33431
City, State and Zip

6. The name and address of the new registered agent and/or office:

Craig Stein, Esq.

Name 11555 Heron Bay Blvd.

Florida street address (P.O. Box NOT acceptable)

Coral Springs

33076

City, State and Zip

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)

John S. Monroe

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my auties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability 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** 

INHS18(10/99)