

**SUITE 101, 1601 JACKSON STREET  
POST OFFICE BOX 249  
FORT MYERS, FLORIDA 33902-0249**

**GORDON R. DUNCAN**  
**ROBERT E. TARDIF JR.**

**TELEPHONE (941) 334-4574**  
**FAX (941) 334-3378**  
**E-MAIL: [ftmylaw@gate.net](mailto:ftmylaw@gate.net)**

00789-00524-00671  
form

August 15, 2001

9/13

**WV**

m-144a

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Statement of Change of Registered Office or Registered Agent or Both for Corporations 5888815130

800004542838--2  
-08/20/01--01114--002  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Dear Clerk:

Please find enclosed with this letter three (3) original Statements of Change of Registered Agent for Corporations for filing. You will also find enclosed our three (3) firm checks, each in the amount of \$35.00, which represent the filing fee. Please return a filing receipt to the undersigned in the return envelope provided.

Thank you for your attention to this matter. Should you have any questions or comments, please do not hesitate to contact me.

Very truly yours,

Brigitte L. Kenney  
Legal Assistant

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 SEP 13 AM 9:23

**FILED**

/blk  
Enclosures



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

August 24, 2001

BRIGITTE L. KENNEY  
DUNCAN & TARDIF, P.A.  
POST OFFICE BOX 249  
FORT MYERS, FL 33902-0249

SUBJECT: IDL MORTGAGE, LLC  
Ref. Number: M00000001449

We have received your document for IDL MORTGAGE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached form to change the Registered Agent for a Limited Liability Company. The form submitted is for a Corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges  
Document Specialist

Letter Number: 401A00048571

**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. The name of the limited liability company is: IDL Mortgage, L.L.C.
2. The mailing address of the limited liability company is: 1205 Cape Coral Parkway  
Cape Coral, FL 33904
3. Date of filing/registration in Florida 7/20/00
4. Document number M00000001449

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

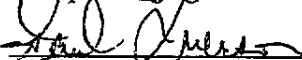
C T Corporation System  
Name  
1200 S. Pine Island Road  
Address  
Plantation, FL 33324  
City, State and Zip

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

Robert E. Tardif Jr.  
Name  
1601 Jackson Street, Suite 101  
Florida street address (P.O. Box NOT acceptable)  
Fort Myers FL 33901  
City, State and Zip

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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)

Paul Iverson, Vice President  
(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 duties, 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