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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: The National Association For Consumer Credit Education)
DOCUMENT NUMBER: NO3000003345
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lordes Negreva (Name of contact person)
The NATE Asse. For Consumer Credit Education. (Firm/Company)
2121 N. Constrore Dr. #811 (Address)
MIAMI, FL 33137 (City/state and zip code)
For further information concerning this matter, please call:
Lox des Negrein at (305) 854-0069 (Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.	_
1. The name of the corporation: The National Assc. For Consumer Credit Education	I, northe
2. The principal office address: 3131 N BAYShore Or. #811	
MIAMI, FL 33137	
3. The mailing address (if different): \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
4. Date of incorporation/qualification: 03/18/03 Document number: > 030000000000000000000000000000000000	1345
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
SARWA GNAZAI	
1909 SW 37 AVR	
MAHI, FC 33145	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	≟ ⊓
Lowdes Negreira	<u>כ</u>
3131 N. Brystone or. 4811 (P.O. Box NOT acceptable)	
MANY, FL 33137	
The street address of its registered office and the street address of the business office of its registered age as changed will be identical.	ent,
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
(Signature of an opticer or director) Lour des Degrette, Executive (Printed or sped name and title)	Drector
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
Lumadeya 3/31/05	
(Signature of Registered Agent) (Date)	_
If signing on behalf of an entity:	
(Typed or Printed Name)	

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE