## N03000005284

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DIVISION OF CERPORATION

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## **COVER LETTER**

	Amendment Section Division of Corporations
SUBJE	CT: A New Horizon Credit Counseling Services of Maryland, Inc (Name of corporation)
DOCUI	MENT NUMBER: N03000005284
The enc	losed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please r	return all correspondence concerning this matter to the following:
	Steven S. Stark, Esq. (Name of contact person)
	A New Horizon Credit Counseling Services (Firm/Company)
	Financial SOlutions Tower 2950 W. Cypress Creek Rd., Suite 300 (Address)
	Ft. Lauderdale, FL 33309 (City/state and zip code)
For furtl	her information concerning this matter, please call:
St	teven S. Stark at (954) 545-6160 (Area code & daytime telephone number)
Enclose	ed 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

statement of change	visions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, to e is submitted for a corporation organized under the laws of the State of <u>Mary a</u> o change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	corporation: A New Horizon Credit Counseling Service	es of Maryland,
2. The principal of	fice address; 2950 W. Cypress Creek Rd., Suite 300	J
_EtLaud	erdale, FL 33309	
	ress (if different):	
4. Date of incorpor	ation/qualification: 10/19/2003 Document number: N03000005	5284
5. The name and st Florida Departm	reet address of the current registered agent and registered office on file with the ent of State:	
	Stephen D. Marcus	
	500 Fairway Drive, Ste. 208	50 DIV
	Deerfield Beach, FL 33441	SECRETARY ISSUM OF C
6. The name and st (if changed):	reet address of the new registered agent (if changed) and /or registered office	FILED STA ARY OF STA OF CORFORAL
	Stephen D. Marcus	ATTIO
	Financial Solutions Tower	o E
	(P.O. Box NOT acceptable)	
	2950 W. Cypress Creek Rd., Ste. 300 Ft. Lauderdale, FL 33309	
The street address as changed will be	of its registered office and the street address of the business office of its register identical.	red agent,
Stephe	tuthorized by resolution duly adopted by its board of directors or by an officer so toard, or the corporation has been notified in writing of the change.  Stephen D Marcus CEO (Printed or typed name and title)	
I further agree to c of my duties, and I document is being	e appointment as registered agent and agree to act in this capacity, comply with the provisions of all statutes relative to the proper and complete per am familiar with and accept the obligation of my position as registered agent, filed merely to reflect a change in the registered office address, I hereby confirmen notified in writing of this change.	rformance Or, if this n that the
Stephe (Signature	ms Manuel 07/21/04 ure of Registered Agent) (Date)	
If signing on behal	f of an entity:	
Stephen	D. Marcus d or Printed Name)	

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