## N9500000911

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SECULTARY OF STATE
DIVISION OF CORPORATION

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: A New Horizon Credit Counseling Services, Inc. (Name of corporation)	
DOCUMENT NUMBER: N950000091	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for file	ing.
Please 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)	_
(Address)	
Ft. Lauderdale, FL 33309	
(City/state and zip code)	
For further information concerning this matter, please call:	
Steven S. Stark at (954 ) 545-6160 (Name of contact person) (Area code & daytime telepho	one 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	

## ¥TATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chan	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, ge is submitted for a corporation organized under the laws of the State of $\Floe$ to change its registered office or registered agent, or both, in the State of Florida.		<u> </u>
1. The fiame of the	e corporation: A New Horizon Credit Counseling Service	ces.	Inc.
2. The principal o	ffice address: 2950 W. Cypress Creek Rd., Suite 300		<del></del>
_EtLau	derdale, FL 33309	<u> </u>	
3. The mailing ad	dress (if different):		· · · · · · · · · · · · · · · · · · ·
4. Date of incorpo	ration/qualification: 2/24/1995 Document number: N950000		
5. The name and a Florida Departs	treet address of the current registered agent and registered office on file with the nent of State:		
_	Stephen D. Marcus	70	AIO S
	500 Fairway Drive, Ste. 208	JUL	
	Deerfield Beach, FL 33441	26	55 C
6. The name and s (if changed):	treet address of the new registered agent (if changed) and /or registered office	PM  2: 0	OF STATE
	Stephen D. Marcus	_	35
_	Financial Solutions Tower		
	(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 e identical.	red ag	ent,
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or by an officer s board, or the corporation has been notified in writing of the change.  Stephen D. Marcils CEC of an officer or director)  Stephen D. Marcils CEC (Printed or typed name and tide)		es
I hereby accept the I further agree to of my duties, and document is being corporation has be	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 I 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 confir ten notified in writing of this change.	rforma Or, if n that	ance this the
Style (Signa	und Marchet 07/21/04  ture of Registered Agent) (17tate)		<del></del> ·
If signing on beha	If of an entity:		
	D. Marcus ed or Printed Name)		

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