P00000020138

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
0.45.40
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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07/05/11--01015--014 **35.00

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2011 JUL -5 AM 8: 39
SECRETARY OF STATE
ANALYSEEF, FI ORIO.

Office Use Only

R.A.

TBKDUN 7-7-11

COVER LETTER

TO: Amendment So Division of Co			
SUBJECT:	Sebring Pawn & Ch	eck Cashing, Inc.	_
	ranic of	Corporation	
DOCUMENT NUMB	er:P00	0000020138	<u> </u>
The enclosed Statemen	t of Change of Registered Offi	ice/Agent and fee are submitted for	filing.
Please return all corres	oondence concerning this matt	er to the following:	_
•	C		
	Robert:	S. Swaine	
		ontact Person	
		Harris, P.A.	_
	Firm/C	Company	_
		mmerce Avenue dress	_
	Au	uress	
	0.1.1.5	00070 0700	
	Sebring, FL City/State a	33870-3702 and Zip Code	_
	,		
		andlaw.com	₹
E-m	iall address: (to be used for	future annual report notification	i)
For further information	concerning this matter, please	call:	
Te	rri Watson	at (863) 38	5-1549
Name of	Contact Person	at (863) 38 Area Code & Daytime Tele	phone Number
Enclosed is a \$35.00 ch	eck made payable to the Depar	rtment of State.	
	Mailing Address:	Street Address:	
•	Amendment Section	Amendment Section	
	Division of Corporations	Division of Corporati	ons
	P.O. Box 6327	Clifton Building	on Cinata
	Tallahassee, FL 32314	2661 Executive Cente	ir Circie

Tallahassee, FL 32301

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 Statement of change is submitted for a corporation organized under the laws of the State of Floring in order to change its registered office or registered agent, or both, in the State of Floring	orida	<u></u>	-
1. The name of the corporation: Sebring Pawn & Check Cashing, Inc.			
2. The principal office address: 419 N. Ridgewood Drive, Sebring, FL 33870			
3. The mailing address (if different):			
4. Date of incorporation/qualification: 02/25/2000 Document number: P00	000002	20138	}
5. The name and street address of the current registered agent and registered office on file with t Florida Department of State: (If resigned, enter resigned)	the		
Clifford R. Rhoades			
2141 Lakeview Drive	7.0	201	
Sebring, FL 33870	ECRE	2011 JUL	13
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	ASSEE.	7	m
Robert S. Swaine	FLOR	群 8: 39	O
425 South Commerce Avenue P.O. Box NOT acceptable	57	39	
Sebring, FL 33870			
The street address of its registered office and the street address of the business office of its ras changed will be identical.	egistere	d ager	nt,
Such change was authorized by resolution duly adopted by its board of directors or by an of authorized by the board, or the corporation has been notified in writing of the change.	fficer so		
Jerald C. Flaherty, Pre Signature of an officer of director Signature o			-
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 comple of my duties, and I am familiar with and accept the obligation of my position as registered a document is being filed merely to reflect a change in the registered office address, I hereby corporation has been notified in writing of this change.	lete perf agent. (confirm	formar Or, if t that t	ıce his he
6/29/11			_
Signing on behalf of an entity:			

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