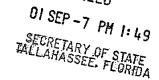
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Requester's Name Equitable Funding Group Licensed Mortgage Brokerage Business **ROXANA PIO** Principal Broker Tel: (954) 581-0400 xt. 402 Office Use Only 3325 S. University Drive #101 Fax: (954) 581-0447 Davie, Florida 33328 VUMBER(S), (if known): E-mail: roxypio@aol.com (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Certified Copy Pick up time ■ Walk in Certificate of S Photocopy Will wait Mail out **AMENDMENTS NEW FILINGS** Amendment Profit Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/QUALIFICATION OTHER FILINGS Foreign Annual Report Limited Partnership Fictitious Name RA Chang Reinstatement Trademark Other **Examiner's Initials**

CR2E031(7/97)

S. PAYNE SEP 1 4 2001



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,	
the undersigned corporation organized under the laws of the State of 4/023da 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 corporation: the closing group. com Inc	"
2. The mailing address of the corporation: 5950 W. Oakland PK Blvd # 200 Lauder hill F1 33313	
3. Date of incorporation/qualification:	.=
4. The name and address of the current registered agent and office:	
Boxana Pio	
5950 W Oakland PKBlvd #200	
1 auderhill = 1 33313	
5. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)	
RAUL DUINTA NA	
3325 S. UNIVERSITY DR # 101	
DAVIE FL 33314	
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.	
1 1 1 1 9 14 2mi	
(Signature of an officer, chairman or vice chairman of the board) (Date)	
ROXANA PID WRent RIA/Resident. (Printed or typed name and title)	
Having been named as registered agent and to accept service of process for the above stated corporation, 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.	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
(Typed or Printed Name) (Capacity)	
* * * FILING FEE: \$35.00 * * *	
CR2E045(9/00) DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32314	