

P000000060731

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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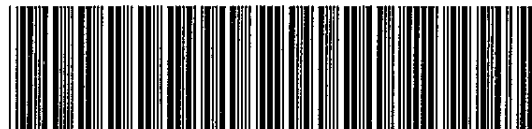
(Business Entity Name)

(Document Number)

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4P8 PAREN 01  
11-21-02

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Mitigation Credit Sales, Inc.

(Name of corporation)

**DOCUMENT NUMBER:** P00000060731

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:

Michele Tedrick

(Name of person)

Mitigation Credit Sales, Inc.

(Name of firm/company)

3215 NW 10th Terrace, Suite 209

(Address)

Fort Lauderdale, FL 33309

(City/state and zip code)

For further information concerning this matter, please call:

Michele Tedrick

(Name of person)

at

( 954 )

462-1707

(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



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State

November 15, 2002

MICHELE TEDRICK  
3215 NW 10TH TERRACE, SUITE 209  
FT. LAUDERDALE, FL 33309

SUBJECT: MITIGATION CREDIT SALES, INC.  
Ref. Number: P00000060731

We have received your document for MITIGATION CREDIT SALES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name and capacity of the person signing on behalf of the new registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain  
Document Specialist

Letter Number: 702A00062018

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Mitigation Credit Sales, Inc.
2. The principal office address: 3215 NW 10th Terrace, Suite 209, Fort Lauderdale, FL 33309
3. The mailing address (if different): same as above

4. Date of incorporation/qualification: June 22, 2000 Document number: P00000060731

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Lewis J. Lautin

3215 NW 10th Terrace, Suite 209

Fort Lauderdale, FL 33309

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

George I. Platt, Shutts & Bowen, LLP

200 East Broward Blvd, Suite 2000

(P.O. Box or personal mailbox NOT acceptable)

Fort Lauderdale, FL 33301

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, or the corporation has been notified in writing of the change.

  
(Signature of an officer, chairman or vice chairman of the board)

David L. John, Vice President

(Printed or typed name and title)

*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.*

  
(Signature of Registered Agent)

October 17 2002  
(Date)

If signing on behalf of an entity:

George I. Platt  
(Typed or Printed Name)

Secretary  
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:  
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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NOV 21 PM 2:40  
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TALLAHASSEE, FLORIDA