P00000077974

•	
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT I	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Eiling Officer	
Special Instructions to Filing Officer:	

Office Use Only



900076287889

06/19/06--01025--035 **35.00

SECRETARY OF STATE OF VISION OF CORPORATION OF CORPORATION OF JUN 19 PM 3:37

RA Change 06/27/06 Dc

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DFG & ASSOCIATES, INC (Name of Corporation)
DOCUMENT NUMBER: POOOOO77974
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:
(Name of Contact Person)
OF6 ASSOCIATES INC (Firm/Company)
4406 S. FLORIDA ANE, SHITE ZZC. (Address)
LA FELAND , FL 33813 (City/State and Zip Code)
For further information concerning this matter, please call:
MIKE DEAJ (Name of Contact Person) at (863) 797-1225 (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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the pi								Δ
	to change its reg							
 The name of th The principal o 	e corporation:	DFG FA	ISSOC	IATES	INC.			·
2. The principal o	ffice address:t	4406 5	, Fo	RIDA	ME	SUITE	22C	. <u> </u>
3. The mailing ad	dress (if different): P.O. 33807	BOX	640	×6			
4. Date of incorpo	oration/qualificati	on: 8-11	- Zec	D_ Docu	ment numb	er: <i>Poococc</i>	0779	74
5. The name and s Florida Departr	street address of t							
_		Æ E.				•	96	SEC
_	1060	2 KESW	ICK	PL			ער	器
-	TAMP	A FL	3	3626			5	F CO
6. The name and s (if changed):	street address of t	he new registe	red agent	(if change	ed) and /or r	egistered offic	e	SECRETARY OF SATIO
_	MICHAE	S. FLOR	EAN	SR				37
_	4406	s. From	40A	AVE	SHITE	22C		•
_	LAKEL	APON) /	L 35	843		 		
The street address as changed will b	s of its registered e identical.	d office and th	e street a	ddress of	the busines	s office of its	registered a	gent,
Such change was authorized by the	authorized by reboard, or the co	esolution duly rporation has	adopted been not	by its boa	ord of direct riting of the	ors or by an o	fficer so	
Min 96 (Signature	of an officer or direct	or)		MICHA	E. A	EAN, SA 1 typed hame and thi	PESIDEN	JT
I hereby accept the I further agree to of my duties, and decument is being corporation has be	he annointment a	is registered a	gent and all statu the oblig ge in the change.	l naree to	act in this a	anacity		
In 20	8		_		6-15	-06		
-	ature of Registered Ag	ent)	_			(Date)	-	
If signing on beha								
MIGHAEL E	ped or Printed Name)	<u> </u>	_					
		***FIL	ING FEI	E: \$35.00	* * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)