

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

REGISTERED AGENT CHANGE
PROQUEST MORTGAGE & LENDING INC..

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

FILED
2007 NOV -7 PM 3:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Change
88

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Corporate Filing Menu

Help



November 7, 2007

FLORIDA DEPARTMENT OF STATE

Division of Corporations

PROQUEST MORTGAGE & LENDING INC..
4818 W COMMERCIAL BLVD
FORT LAUDERDALE, FL 33319

SUBJECT: PROQUEST MORTGAGE & LENDING INC..
REF: P01000025934

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

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) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

FAX Aud. #: H07000273571
Letter Number: 707A00064801

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TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

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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: Proquest Mortgage & Lending Inc.,
2. The principal office address: 4818 W. Commercial Blvd., Tamarac, FL 33319
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/08/2001 Document number: P01000025934
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Careen Armstrong

4818 W. Commercial Blvd.

Tamarac, FL 33319

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

Neville Pedro

4818 W. Commercial Blvd.

(P.O. Box NOT acceptable)

Tamarac, FL 33319

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 or director)

Neville Pedro, President

(Printable or typewritten 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)

November 6, 2007

(Date)

If signing on behalf of an entity:

Neville Pedro

(Typed or Printed Name)

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

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

CR2ED45 (8/05)

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