P02000115564

(Requestor's Name)			
		:	
ESCU IERN GEOUREN FINANCE COMPANY			
1/400 SW 5	0" Terrace, Sulta 101 Florida 33155		
(Cit	ty/State/Zip/Phone	#)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nam	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
	···	····	
Special Instructions to	Filing Officer:		





000009028580

11/21/02--01039--002 **35.00



R.A. Change

T BROWN DEC - 2 2002

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

	provisions of sections 607.0502, 617.0502, 607.150. poration organized under the laws of the State of	=
	owing statement in order to change its registered office	•
State of Florida		-
1. The name of	the corporation : SSFC HOUSING NUMBER ONE	INC.
4		
2. The mailing a	address of the corporation: 5712 Hollywood Bou	levard
J	Hollywood, FL 3302	
3. Date of incor	poration/qualification: 10/24/2002 Doc	ument number:
4. The name and	address of the current registered agent and registered	d office:
	Southern Security Finance Compa	
	7100 gr. 70 gr	
	7400 SW 50 Terrace, Suite 101	Fig. 7
,	Miami, FL 33155-4481	
5. The name and	d address of the new registered agent (if changed) and	d /or registered office (if changed
	Jeannette O. Blanco	
	3389 Sheridan Street, Suite 248	B
	Hollywood, FL 33021-3628	
The street addragent, as change	ess of its registered office and the street address of ed, will be identical.	the business office of its registered
Such change w	es authorized by resolution duly adopted by its boatle board.	ard of directors or by an officer so
authorized by t	1 XS 1 XM -	- 11/8/202
(Signature	of an officer, chairman or vice chairman of the board)	(Date)
` ` `	flio P. Dominguez	.
	(Printed or typed name and title)	<u></u>
Having been no corporation, I if further agree performance of registered again	amed as registered agent and to accept service of phereby accept the appointment as registered agent to comply with the provisions of all statutes relatively my duties, and I am familiar with and accept the complex controls.	process for the above stated and agree to act in this capacity. we to the proper and complete obligation of my position as
	(\d)\(\lambda\)	-18.00v-07
	Signature of Registered Agent)	(Date)
If signing on beha	alf of an entity:	
Jen	Pyped of Printed Name	(Capacity)
/	· ·	

CR2E045(8/99)

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