P02000115647

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TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Florida Business Finance Corp (Name of corporation)
DOCUMENT NUMBER: P02000115647
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:
Mark F. Gruszecki
(Name of person)
Florida Business Finance Corp
(Name of firm/company)
4190 Belfort Road, Suite 321
(Address)
Jacksonville, Florida 32216
(City/state and zip code)
For further information concerning this matter, please call:
Mark F. Gruszecki at (904) 279-9203 (Name of person) (Area code & daytime telephone number)
(Name of person) (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

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

	e provisions of sections 607.0502, of change is submitted for a corpor in order to change its regi		the State of
of Florida. 1. The name of	the corporation: Florida Business		,
• -	office address: 4190 Belfort Road		2216 - Please change
3. The mailing	address (if different): Same as abo	eve	
4. Date of incor	poration/qualification: 11/2002	Document number:	P02000115647
	d street address of the current regis rtment of State:		on file with the
	FLORIDA AGENT SERVICES, IN	C	 -
	1221 BRICKELL AVE STE 900		
	MIAMI FL 33131		
6. The name as changed):	nd street address of the new regis	stered agent (if changed) and /or	registered office (if
	4190 Belfort Road, Suite 200		
	(P.O. Box of personal	mailbox NOT acceptable)	
	Jacksonville, Florida 32216		
agent, as chang	ess of its registered office and the ed will be identical.		
Such change wanthorized by	as authorized by resolution duly a he board, or the corporation has b	dopted by its board of directors of een notified in writing of the char	or by an officer so nge.
(Signature of an office	r, chairman or vice chairman of the board)	Mark F. Gruszecki - President (Printed or typed name and til	lie)
I hereby accept I further agree performance of registered ager	t the appointment as registered ag to comply with the provisions of a fmy duties, and I am familiar with t. Or, if this document is being fi I hereby confirm that the corpora	ent and agree to act in this capa all statutes relative to the proper and accept the obligation of my led merely to reflect a change in	city. and complete position as the registered
~ + ~		12/31/2002	
(5	signature of Registered Agent)	(Date)	CC T
If signing on beha	If of an entity:		
(Typed or Printed Name)	(Capacity)	
	* * * FILING	FEE: \$35.00 * * *	
		Department of State and Mail to: Box 6327, Tallahassee, FL 32314	D IZ: 59