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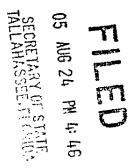
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: STUART LENDING   N(ORPORATEL)  (Name of corporation)
DOCUMENT NUMBER: PO 2000 125 890
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:
LYDIE ASCHHEIM (Name of contact person)
STUART LENDING INC. (Firm/Company)
5619 SCHOONER OAKS WAY (Address)
STUART FL 34997 (City/state and zip code)
For further information concerning this matter, please call:
LYDIE ASCHHEIM at (772) 2838074  (Name of contact 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

statement of change is sub	mitted for a corporation organ	02, 607.1508, or 617.1508, Floride nized under the laws of the State oj tered agent, or both, in the State of	FLORIDA
1. The name of the corpor	ation: STUART LE	NOING INCORPOR	RATED
2. The principal office add	iress: 5614 SE	SCHUONER DAKS	WAY
	STUART,	FL 34997	
3. The mailing address (if	different): PO BOX STUART	3107 FL 34995	
4. Date of incorporation/q	ualification: NOV 27, 20	202 Document number: PO2	000 125 890
-	iress of the current registered a	agent and registered office on file v	
L-	DIE ASCHHEIM	1	TAS OF
		JER DAKS WAY	TECRES IS
<u></u>	TUART FL 3	4997	6 24 TARRY
(if changed):	lress of the new registered age	nt (if changed) and /or registered of	office F. STATE STATE
	211 THE PLY (P.O. Box NOT acceptable	•	<del></del> · · · · · · · · · · · · · · · · · ·
	•	DD, FL 33404	
The street address of its ras changed will be identicated	egistered office and the street	address of the business office of	its registered agent,
Such change was authorized by the board,	zed by resolution duly adopte or the corporation has been no	ed by its board of directors or by a potified in writing of the change.	an officer so
L Mili-		LYDIE A SCHHEIM	1, PRESIDENT
(Signature of an office of an o	•	(Finited of typed name ar nd agree to act in this capacity, tutes relative to the proper and co ligation of my position as registe he registered office address, I her t.	
(Signature of Re	Marile Dutant	8/22/05	
(Signature of Re	<u></u>	· Vinate)	
(Typed or Prin			ž

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