P03000050242

SSFC HOUSING NUMBER NINETEEN INC.		
5712 Hollywood Boulevard		
Hollywood, FL 33021-6350		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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2003 JUN 26 PM 4: 31

RA Change 07/08/03 DC

STATEMENT OF CHINGE 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 undersigned corporation organized under the laws of the State of Florida	, Florida Statutes, the
submits the following statement in order to change its registered office or registered	d agent, or both, in the
State of Florida.	6 7 11 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1. The name of the corporation: SSFC HOUSING NUMBER NINETEEN INC.	
2. The mailing address of the corporation: 5712 Hollywood Boulevard	
Hollywood, FL 33021-6350	
3. Date of incorporation/qualification: 04/30/2003 Document number:	P03000050242
4. The name and address of the current registered agent and registered office:	
Southern Security Finance Company	201 S
7400 SW 50 Terrace, Suite 101	SECRETARY NVISION OF CO 2003 JUN 26
Miami, FL 33155-4481	OF CO
5. The name and address of the new registered agent (if changed) and /or registered	office (if changes): 390
Jeannette O. Blanco	· · · · · · · · · · · · · · · · · · ·
3389 Sheridan Street, Suite 248	<u>ω</u> <u>ω</u>
Hollywood, FL 33021-3628	
The street address of its registered office and the street address of the business of agent, as changed, will be identical.	ffice of its registered
Such change was authorized by resolution duly adopted by its board of directors authorized by the board.	or by an officer so
Huel Alla	1/18/2007
(Signature of an officer, chairman or vice chairman of the board) Julio P. Dominguez	(Date)
President	
(Printed or typed name and title)	
Having been named as registered agent and to accept service of process for the corporation, I hereby accept the appointment as registered agent and agree to a l further agree to comply with the provisions of all statutes relative to the proper performance of my duties, and I am familiar with and accept the obligation of megistered agent.	above stated not in this capacity. r and complete ny position as
(Signiture of Registered Agent) (Sate)	· 03
If signing on behalf of an entity:	•
(Typed or Printed Name) (Capacity)

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