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TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| SUBJECT: Faith National Title INC. | rş. |
| (Name of corporation) | _ |
| DOCUMENT NUMBER: P03000071032 | 4,1 |
| 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: | |
| | |
| Daniel Cuesta | |
| (Name of person) | |
| | |
| Faith National Title INC. | |
| (Name of firm/company) | |
| | |
| 7300 NW. 19th St. STE. 715 (Address) | |
| (1200200) | |
| | |
| Miami, Fl 33126 (City/state and zip code) | |
| , , , , , , , , , , , , , , , , , , , | |
| For further information concerning this matter, please call: | |
| 205 074 222 | |
| Daniel Cuestaat (305) 874-2222 (Name of person) (Area code & daytime telephone number) | |
| (1, mino of political) | |
| 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

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this state change is submitted for a corporation organized under the laws of the State of Florida | , |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| to change its registered office or registered agent, or both, in the State of Florida. | in order |
| 1. The name of the corporation: Faith National Title INC. | • |
| 2. The principal office address: 7300 NW. 19th St. STE. 715 | · · · · · · · · · · · · · · · · · · · |
| Miami, Fl 33126 | · |
| 3. The mailing address (if different): | · · |
| 4. Date of incorporation/qualification: 6/26/2003 Document number: P03000071032 | |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: | |
| Perdomo, Jeannette | · <u>:</u> |
| 17710 NW. 73rd Ave. 207 | |
| Miami, Fl 33015 | 0 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): | T I. 04 FEB 17 |
| Garcia, Mario | ≘ ir |
| Garcia Law Offices, P.A. | رة 1 |
| (P.O. Box or personal mailbox NOT acceptable) | 4 |
| 10691 SW. 88th St. STE. 201, Miami, Fl 33176 | |
| The street address of its registered office and the street address of the business office of its registered ag changed will be identical. | ent, as |
| Such change was anthorized by resolution duly adopted by its board of directors or by an officer so authorized, or the corporation has been notified in writing of the change. | orized by |
| (Signature of an officer or director) Daniel Cuesta (Printed or typed 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 perform duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this a being filled merely to reflect a change in the registered office address, I hereby confirm that the corporate bean motified in writing of this change. (Signifure of Registered Agent) If signing on behalf of an entity: | ance of my locument is tion has |
| Mario Garcia | |

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