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## **COVER LETTER**

| TO: Amendment Section Division of Corporations  |
|---|
| SUBJECT: SEAPORT FUNDING, INC. (Name of Corporation)  |
| DOCUMENT NUMBER: P03000 106913  |
| 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:                     |
| GREGORY NICHOLS (Name of Contact Person)  |
| SEAPORT FUNDING INC. (Firm/Company)   |
| P.o. Box 16883 (Address)  |
| FERNANDINA BEACH FL 32035 (City/State and Zip Code)   |
| For further information concerning this matter, please call:                                  |
| CODEGOON NICHOIS 81 (904) 491-1028  |
| (Name of Contact Person) at (904) 491-1025<br>(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## 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  |
|---|
| statement of change is submitted for a corporation organized under the laws of the State of FLORIDA   |
| in order to change its registered office or registered agent, or both, in the State of Florida.   |
| 1. The name of the corporation: SEMPORT FUNDING, INC.   |
| 2. The principal office address: 270 South FLETCHER   |
| FERNANDINA BEACH FL 32034   |
| 3. The mailing address (if different): P.o. Box 10883   |
| FERNANDINA BEACH FL 32035   |
| 4. Date of incorporation/qualification: 9.29, 2003 Document number: 203000106913  |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  |
| LEGALZOOM. COM INC.   |
| 7083 HOLYWOOD BLUD, SUITE 180   |
| HOLLYWOOD CA 90028  |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):   |
| 270 SOUTH FLETCHER (P.O. Box NOT acceptable)  |
| TERNANDINA BEACH FL 32034   |
| The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.  |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.   |
| (Signature and officer or director)  (Printed or typed name and title)  |
| I hereby accept the appointment as registered agent and agree to act in this capacity.<br>I further agree to comply with the provisions of all statutes relative to the proper and complete performance<br>of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this<br>document is being filed merely to reflect a change in the registered office address, I hereby confirm that the<br>corporation has been notified in writing of this change. |
| (Date)  |
| (Signature of Registered Agent) (Date)  |
| If signing on behalf of an entity:  |
| (Typed or Printed Name)   |
| * * * FILING FEE: \$35.00 * * *   |

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314