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TALLAHASSEE, FLORIDA

Ps 7/10/06

TO: A	Amendment Section Division of Corporations			
SUBJECT: BLOCKBUSTER MORTGAGE, INC. (Name of Corporation)				
DOCUMENT NUMBER: P04000139036				
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:				
	KURT A. BARRETO (Name of Cont.)	act Person)		
BLOCKBUSTER MORTGAGE, INC. (Firm/Company)				
10 NE 1 AVE. (Address)				
BOCA RATON, FLORIDA 33432 (City/State and Zip Code)				
For further	er information concerning this matter, please cal	II:		
LEISA BARRETO at (561) 347-5363 (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	Street Address: Amendment Section Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		

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

statement of cha	nge is submitted for a corporation organ	z, 607.1308, 67 617.1308, Florida Statutes, this ized under the laws of the State of FLORIDA red agent, or both, in the State of Florida.
	he corporation: BLOCKBUSTER MORTO	
2. The principal	office address: 10 NE 1 AVE., BOCA RA	TON, FLORIDA 33432
3. The mailing a	ddress (if different): 10 NE 1 AVE., BOO	CA RATON, FLORIDA 33432
4. Date of incorp	poration/qualification: OCT. 7, 2004	Document number: P04000139036
	street address of the current registered agtment of State:	gent and registered office on file with the
	KURT A. BARRETO	
	399 CAMINO GARDENS BLVD	O. STE. 304
	BOCA RATON, FLORIDA 33432	30
6. The name and (if changed):	street address of the new registered agen	t (if changed) and /or registered office
	BOCA RATON, FLORIDA 3343 (P.O. Box NOT acceptable)	······································
as changed will	be identical.	address of the business office of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted the board, or the corporation has been no	by its board of directors or by an officer so tified in writing of the change.
KA	15	KURT A. BARRETO (Printed or typed name and title)
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and comply with the provisions of all state of a manager of the obling filed merely to reflect a change in the been notified in writing of this change.	d agree to act in this capacity. Ites relative to the proper and complete performance gation of my position as registered agent. Or, if this e registered office address, I hereby confirm that the
(Sig	enature of Registered Agent)	(Date)
If signing on be	half of an entity:	
Γ)	yped or Printed Name) * * * FILING FE	F- \$35 AA * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)