

FROM : LAZARUS
Division of Corporations

FAX NO. : (305) 220-1440

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

REGISTERED AGENT CHANGE

AMERICAN HOME LENDING AND INVESTMENT GROUP INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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DIVISION OF CORPORATIONS

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

Pursuant to the provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: American Home Lending
And Investment Group Inc
2. The mailing address of the corporation is: 3473 SW 8ST
Miami, FL 33135
3. Date of incorporation/qualification: 2/10/2005 Document number: DD5000022106
4. The name and address of the current registered agent and office:
Francisco Rodriguez
3473 SW 8ST
Miami, FL 33135

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Rolando Perez
3473 SW 8ST
Miami, FL 33135

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.

(Signature of an officer, chairman or vice chairman of the board)

(Date)

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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 performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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