12/10/2020

Division of Corporations

Florida Depart

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(((H20000423200 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500 Fax Number : (702)866-2689

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: __managedreports@incorp.com

REGISTERED AGENT CHANGE CONSUMER REAL ESTATE FINANCE CO.

Certificate of Status	0
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TO:

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COVER LETTER

Amendment Section Division of Corporations

SUBJECT: Consumer Real Estate Finance Co. Name of Corporation	
DOCUMENT NUMBER: P05000038153	
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:
Janice Null Name of Contact Person	
InCorp Services, Inc.	
Firm/Company	-
3773 Howard Hughes Parkway Suite 500S	
Address	_
Las Vegas, NV 89169-6014	
City/State and Zip Code	<u>—</u>
managedreports@incorp.com	
E-mail address: (to be used for future annual report notifi	cation)

For further information concerning this matter, please call:

Janice Null on behalf of InCorp Services, Inc.

Name of Contact Person

at (702) 866-2500

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS H20000423200 3

statement of cha	provisions of sections 607.0502, 617.0502 inge is submitted for a corporation organi ir to change its registered office or registe	ized under the laws of the State of <u>F</u>	lorida	<u> </u>
	Consumar Paul Fate	·	orida.	
2. The principal office address: 727 NE 3rd Ave #300, Fort Lauderdale, FL 33304				
_				
4. Date of incorp	poration/qualification: 03/14/2005	Document number: P050000	038153	
	d street address of the current registered at trment of State: (If resigned, enter resigne	gent and registered office on file wit		
	TURNER, CHAD			
	115 NE 3RD AVENUE #706		2	2
	FT LAUDERDALE, FL 33301		אט טכ	אפאף טבר
6. The name and (if changed):	i street address of the new registered ager	at (if changed) and /or registered offi	ce =	:
	InCorp Services, Inc.			IC
	17888 67th Court North		ر	γι Συ ,⊸.,
	P.O. Box	NOT acceptable	;	<i>,</i> ,
	Loxahatchee, FL 33470			
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its	registered	agent,
Such change we authorized by th	as authorized by resolution duly adopted he board, of the corporation has been no	by its board of directors or by an cutified in writing of the change.	officer so	
Signatu	re of an disser or director	Chad A Turner, Presid		
I further agrée i of my duties, an document is bei	the appointment as registered agent and to comply with the provisions of all state and I am familiar with and accept the obli- ing filed merely to reflect a change in the s been notified in writing of this change.	ites relative to the proper and comi gation of my position as registered e registered office address. I hereb	plete perfor agent. Or y confirm ti	rmance if this hat the
San	ice Jull	December 10, 20	020	
Sig	nature of Registered Agent	Date		
If signing on be	chalf of an entity:			
Janice Null or	behalf of InCorp Services, Inc.			
T	yped or Printed Name			

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