

PD5 000043794

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

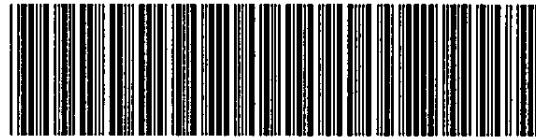
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Mr. Gonzalez authorized by
phone to change principal
address from PO Box

Thews 12/13/06

Office Use Only



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2006 DEC 11 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DOLPHIN FINANCE OF FLORIDA, INC.
(Name of Corporation)

DOCUMENT NUMBER: P05000043794

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:

JORGE L. GONZALEZ
(Name of Contact Person)

DOLPHIN FINANCE OF FLORIDA INC
(Firm/Company)

P.O. Box 51697
(Address)

LIGHTHOUSE POINT, FL 33074
(City/State and Zip Code)

For further information concerning this matter, please call:

JORGE L. GONZALEZ at (866) 759-5933 X-704
(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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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.

- Joel T. Brow

1394 NE 48th STREET

Романо Бенет, FL 330 64

- Jorge L. GONZALEZ

1394 NE 48th STREET

(P.O. Box NOT acceptable)

Романо Витен, FL 33064

(Signature of an officer or director)

JOEL J. Brown

(Printed or typed name and title)

(Signature of Registered Agent)

11/1/06
(Date)

(Date)

(Typed or Printed Name)

CR2E045 (8/05)