P05000043794

(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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SECRETARY OF STATE



COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Dolphin Finance of Florida, Inc. Name of Corporation				
	Name of C	Corporation		
DOCUMENT NUM	мвек:	000043794		
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:				
rease return an correspondence concerning this matter to the following.				
		· •		
Jorge L. Gonzalez Name of Contact Person				
Name of Contact Letson				
Dolphin Finance of Florida, Inc. Firm/Company				
run/company				
P.O. Box 51697 Address				
	Add	iress		
Lighthouse Point, Florida 33074-1697 City/State and Zip Code				
City/State and Zip Code				
icalbrow@balloouth not				
joelbrow@bellsouth.net E-mail address: (to be used for future annual report notification)				
E man address. (to be ased for fature annual report notification)				
For further information concerning this matter, please call:				
le	orge L. Gonzalez	866 . 750 5022 V704		
	ne of Contact Person	at (<u>866</u>) 759-5933 X704 Area Code & Daytime Telephone Number		
The source of Source Person Number				
Enclosed is a \$35.00 check made payable to the Department of State.				
.,				
	Mailing Address:	Street Address:		
	Mailing Address: Amendment Section	Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314 2661 Executive Center Circle			

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH ${}^{\star}{}_{\bullet}$ 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: Dolphin Finance of Florida, Inc.	
2. The principal office address: 1600 S. Dixie Highway, Suite 110	
Boca Raton, Florida 33432	
3. The mailing address (if different): P.O. Box 51697	
Lighthouse Point, Florida 33074-1697	
4. Date of incorporation/qualification: 03/05/2005 Document number: P050000437	794
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Jorge L bonzalez	
1394 A F 485t	75E 70
Fompano Beach, Fl 33064	APR 22
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	SEF. FI
Jorge L. Gonzalez	===
1600 S. Dixie Highway, Suite 110	CB L.
P.O. Box NOT acceptable	
Boca Raton, Florida 33432	
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	igent,
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.	
Joel Brow - President Sphakur of a officer or director Printed or typed name and title	
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 perform of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, document is being filed merely to reflect a change in the registered office address, I hereby confirm the corporation has been notified in writing of this change.	nance if this at the
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Tuned or Drinted Name	

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