P0500132139

(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:

Office Use Only



000082373230

12/11/06--01057--007 **35.00

FILED 2006 DEC 11 PM 3: 27 SECRETARSEE, FLORIGI



COVER LETTER

Division of Corporations
SUBJECT: 6/06/21 funding Kepless, Coup. (Name of Corporation)
DOCUMENT NUMBER: 205000 182139
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:
DAINOUM COUELLA - Kden
(Name of Contact Person)
610bal kinding Express, Corp.
(Firm/Company)
1500 NW 108 M Avenue For F
1500 NW 108 Menul Avenue (Address) Alani, & 33172 (City/State and Zip Code)
(City/State and Zip Code)
at
(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

TO:

Amendment Section

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

statement of change is submitted for a corporation organized under the laws of the State of Tlou DA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: 610bac Funding Express, Corp. 2. The principal office address: 1500 Northwest 108 Th Arealue, Jami R 33172
2. The principal office address. 1-30 100 100 100 100 100 100 100 100 100 1
3. The mailing address (if different): \sqrt{A}
4. Date of incorporation/qualification: 9/23/2005 Document number: P05000 132 139
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Hymee D. Rodnisuez
Agnee D. Podrisusz 7180 S.W 444 Street
MIANI, R 33144
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
(if changed): DANOLIA GUELLA KOLLA TOTA SE LOSA SILVA
2019 SE 1941 News 33 = F
Homeskad, ti 33035
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, or the corporation has been notified in writing of the change.
(Signature of an officer or director) Annoli A Courant - kalen (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 performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Typed or Printed Name)
* * * FILING FEE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (8/05)