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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: South FL. Ir	nvestment Services, Inc.	· · · · · · · · · · · · · · · · · · ·
and the second of the second o		
DOCUMENT NUMBER: P05000156807		
The enclosed Articles of Amendment and fee are	e submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Hubert Campbell		,
(Name of	f Contact Person)	
The second secon	,	•
South FL. Investment Ser	vices, Inc.	
(Firm	n/ Company)	
640 N.E. 149th Street	,	
. (Address)	
	•	,
North Miami, Florida 33161		<u>. </u>
(City/ Sta	ate and Zip Code)	
For further information concerning this matter, p	olease call:	
Hubert Campbell	at (786) 287-42	46
(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for the following amount:		
☑ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
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 Ci Tallahassee, FL 32301	rcle

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

	•	17.0502, 607.1508, or 617.1508, Florida Statutes, the organized under the laws of the State of Florida	iis
		registered agent, or both, in the State of Florida.	
1. The name of	the corporation: South FL. Invest	tment Services, Inc.	
	office address: 640 N.E. 149th S		,
	,		
3. The mailing	address (if different):		
,			
4. Date of inco	rporation/qualification: November	29, 2005 Document number: P05000156807	
	nd street address of the current regist artment of State:	tered agent and registered office on file with the	
	The Law Offices of Maril	yn L. Maloy, P.A.	Ps. c
	3350 S.W. 148th Avenue, Suite 110		
	Miramar, Florida 33027		TARY ASSE
6. The name are (if changed):	_	ed agent (if changed) and /or registered office	PH 12: I OF STA E. FLOR
	Marilyn L. Maloy		- 30 m
	640 N.E. 149th Street		
	(P.O. Box NOT ac	•	
	North Miami, Florida 33	0101	
The street addr as changed will	ress of its registered office and the ll be identical.	street address of the business office of its registered	ed agent,
Such change v authorized by	yas authorized by resolution duly a the board, or the corporation has b	adopted by its board of directors or by an officer so een notified in writing of the change.)
Hub	of Ompalling airre of an officer or director)	Hubert Campbell (Printed or typed name and title)	
I further agrée of my duties, a document is be	ot the appointment as registered ag e to comply with the provisions of c and I am familiar with and accept t eing filed merely to reflect a chang as been notified in writing of this c	tent and agree to act in this capacity. all statutes relative to the proper and complete per the obligation of my position as registered agent. the in the registered office address, I hereby confirm thange.	formance Or, if this n that the
$\mathcal{N}(z_{\bar{z}})_{a}$) Kaba	7-29-28T	
A Const	gnature of Registered Agent)	(Date)	
If signing on b	pehalf of an entity:		
	(Typed or Printed Name)	-	
	(1) pod Ot 1 intou (1dine)		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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