

P05000168063

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

RACER 6/8/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: First Financial Employee Leasing IV, Inc.
Name of Corporation

DOCUMENT NUMBER: P05000168063

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:

Stephen L. Carpenter, Esq.
Name of Contact Person

Carpenter & Lewis PLLC
Firm/Company

10413 Kingston Pike, Suite 200
Address

Knoxville, TN 37922
City/State and Zip Code

stephen@carpenterlewis.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephen L. Carpenter, Esq. at (865) 690-4997
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

CARPENTER & LEWIS PLLC

ATTORNEYS & COUNSELORS AT LAW



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AMANDA B. BRABHAM

10413 KINGSTON PIKE, SUITE 200
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WWW.CARPENTERLEWIS.COM

June 1, 2011

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: First Financial Employee Leasing IV, Inc.
Document Number: P05000168063

Dear Sir or Madam:

Enclosed please find an original signed Statement of Change of Registered Office or Registered Agent or Both for Corporations, the Secretary of State cover letter, and our client's check in the amount of \$35.00 for the requisite filing fee for the above-referenced corporation. Please return the filed documents to me in the self-addressed, stamped envelope provided.

If you have any questions, please do not hesitate to contact us.

Very truly yours,

Susan E. Conover
Client Services Assistant

/sec

Enclosures

cc: Mr. Philip E. Lawrence (via email) (w/o encls.)
Ms. Kristi Arthur (via email) (w/o encls.)

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
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: First Financial Employee Leasing IV, Inc.
2. The principal office address: 210 W. Marion Ave., Suite 1209, Punta Gorda, FL 33950
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/29/2005 Document number: P05000168063
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)

Kirt Bennett

3745 Tamiami Trail

Port Charlotte, FL 33952

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Kristi Arthur

210 W. Marion Ave., Suite 1209

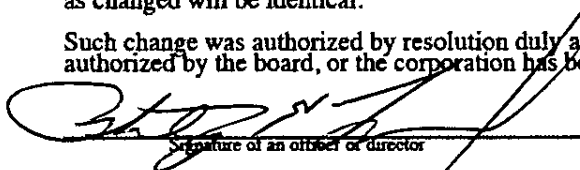
P.O. Box NOT acceptable

Punta Gorda, FL 33950

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Phillip E. Lawrence, President

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.

K. Arthur

Signature of Registered Agent

5-13-11

Date

If signing on behalf of an entity:

KRISTI ARTHUR

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)