

P060000064444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Change

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2012 DEC -3 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
12/4/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Accurate Mortgage Group, Inc
Name of Corporation

DOCUMENT NUMBER: P06000064444

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:

Ciro Almeida

Name of Contact Person

Accurate Mortgage Group, Inc

Firm/Company

7901 Kingspointe Pkwy Ste21

Address

Orlando, FL 32819

City/State and Zip Code

ciro.almeida@amglenders.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ciro Almeida

Name of Contact Person

at (407) 856-5622

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

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: Accurate Mortgage Group, Inc
2. The principal office address: 7901 Kingspointe Pkwy Ste 21
Orlando FL 32819
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 05/05/2006 Document number: P06000064444

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)

Resigned

Wilmer E. Torres

7901 Kingspointe Parkway, Suite 21

Orlando, FL 32819

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

Ciro Almeida

7901 Kingspointe Pkwy Ste 21

P.O. Box NOT acceptable

Orlando FL 32819

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

Ciro Almeida/ 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.


Signature of Registered Agent

11/28/2012

Date

If signing on behalf of an entity.

Ciro Almeida

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 (03/12)