## P06000069825

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## **COVER LETTER**

Division of Corporations
SUBJECT: Jair Morfgage Juc.  (Name of Corporation)
DOCUMENT NUMBER: P 060000 69825
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:
Mana del Rocio Velagguez  (Name of Contact Person)  Fair Mariage Duc.  (Firm/Company)  3228 Hopewell Duies  (Address)
Kissimmee FL 34746 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Maria all Racio Velazquez at (407) 932-3556  (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

	ovisions of sections 607.0502, 613 se is submitted for a corporation o			
	o change its registered office or r	egistered agent, or both, in	the State of Florida.	
1. The name of the	corporation: Fair	Martgage Inc	•	
2. The principal of	fice address: 221 pr	Martgage, Inc.	suite E	
• •	Sissimmel FL	34141	·	
3. The mailing add				
4. Date of incorpor	ration/qualification:	Document num	ber: <u>P06000069825</u>	
5. The name and st Florida Departm		•	fice on file with the	
_	Maria del Roce	o Velazguez		
	3228 Alopen	reel Dr.		
· _	Kissimmee	reel Or. FL 34746		
6. The name and st (if changed):	treet address of the new registered		12 T	こったし
_	221 Birpar	dway ave	oute E ES P	
_	(P.O. Box NOT acc	dway ave,, eptable)  FL 34741		•
The street address as changed will be			ess office of its registered agent,	
<del>-</del>	authorized by resolution duly ac board, or the corporation has be			
Joeid Le	ar an discersor director)	Maria del R	octo Velazauez or typed name and title)	
I further agree to of my duties, and document is being	the appointment as registered age comply with the provisions of a I am familiar with and accept the filed merely to reflect a change seen notified in writing of this ch	ent and agree to act in this ll statutes relative to the p ne obligation of my positio e in the registered office a		
(Signa	ature of Registered Agent)		(Date)	
If signing on beha	alf of an entity:			
(Tvr	ned or Printed Name)			

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