## 106000088887

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

## **COVER LETTER**

Division of Corporations
SUBJECT: EXECUTIVE JUNDING CONTER, INC. (Name of Corporation)
DOCUMENT NUMBER: P06000088887
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:
TATIANA KACHELE (Name of Contact Person)
(Name of Contact Person)
EXECUTIVE ZENDING CENTER, INC. (Firm/Company)
(Firm/Company)
3412 N OCEAN BIVD, STE S
, ,
Ft. LAUDERDALE FL 33308 (City/State and Zip Code)
For further information concerning this matter, please call:
TATIANA KACHELE at (954) 552-0272 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State

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

OT:

Amendment Section

## 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 FLOLIDA
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: EXECUTIVE LENDING CENTER, INC.
2. The principal office address: 3412 N OCEAN BIVD, SUITE S
F1. Lauderonle FL 33308
3. The mailing address (if different): SANE AS ABOVE
5. The maning address (if different).
4. Date of incorporation/qualification: 6/28/2006 Document number: PO6000088287
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
KACHELE, FRANZ D
3412 N OCEAN Blvd, Suite S == FT. Jauderdale FL 33308 == 5
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
REPISTERED AGENT-SAME
ADDRESS - NEW
(P.O. Box NOT acceptable)
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)  TATIANA KACHÉLE V-PRES.  (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)

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 \* \* \*