

PO6000109947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

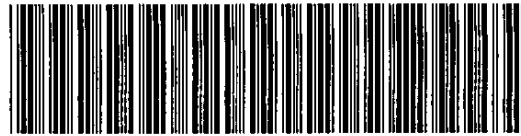
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2012 MAY - 8 P 5:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 14 2012

T. LEMIEUX

Handwritten signature/initials

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Fidelity One Mortgage Group Inc
Name of Corporation

DOCUMENT NUMBER: P06000109947

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:

Shawn Wright

Name of Contact Person

Fidelity One Mortgage Group inc

Firm/Company

3910 SW College Road Suite 200

Address

Ocala, FL 34474

City/State and Zip Code

spwfsu2@aol.com

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

For further information concerning this matter, please call:

shawn wright

Name of Contact Person

at (954) 551-9082

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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Fidelity One Mortgage Group Inc
2. The principal office address: 3910 SW College Road Suite 200 Ocala, FL 34474

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 08/23/2006 Document number: P06000109947

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)

Jason Lapaglia

1515 N university dr Suite 106

Coral Springs, FL 33071

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

Shawn Wright

3910 SW College Road suite 200

P.O. Box NOT acceptable

Ocala, FL 34474

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TALLAHASSEE, FLORIDA

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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]
Signature of an officer or director

Shawn Wright
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]
Signature of Registered Agent

5/3/2012
Date

If signing on behalf of an entity:

Fidelity One Mortgage Group Inc.
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)