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## **COVER LETTER**.

TO: Amendment Section Division of Corporations
SUBJECT: AMERICAN TRUST TITLE, CORP (Name of Corporation)
DOCUMENT NUMBER: P07000049736
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:
(Name of Contact Person)
AMERICAN TRUST TITLE, CORP (Firm/Company)
4967 SW 75 AUE, 2nd Fc (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (786) 506 -6044 (Area Code & Daytime Telephone Number)
Finchised is a \$35.00 check made payable to the Department of State

Mailing Address: Amendment Section

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 FILED 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 Higgs of 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. TALLAHASSEFFIMEDACAN TRUST TITLE, CC 1. The name of the corporation: 2. The principal office address: 3. The mailing address (if different) P07000049736 4. Date of incorporation/qualification: Document number: 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: coral 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): 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. Yuhana (Printed or typed name and title) ure of an officet or director) 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. gnature of Registered Agent) If signing on behalf of an entity:

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

(Typed or Printed Name)