

PD7000109622

(Requestor's Name)

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(Business Entity Name)

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DIVISION OF CORPORATIONS
11 OCT -5 PM 3:05

Polch
10/5/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ACTION LENDING & INVESTMENT, INC
Name of Corporation

DOCUMENT NUMBER: P07000109622

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:

JUAN CARLOS ZURITA

Name of Contact Person

ACTION LENDING & INVESTMENT, INC

Firm/Company

2800 Weston Rd, Suite 202

Address

Weston, Fl, 33331

City/State and Zip Code

jczurita@acfgroupus.com

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

For further information concerning this matter, please call:

Juan Carlos Zurita

Name of Contact Person

at (

954

385-1717

)
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 23, 2011

JUAN CARLOS ZURITA
ACTION LENDING & INVESTMENT, INC.
2800 WESTON RD - SUITE 202
WESTON, FL 33331

SUBJECT: ACTION LENDING & INVESTMENT INC.
Ref. Number: P07000109622

We have received your document for ACTION LENDING & INVESTMENT INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 611A00021983

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11 OCT -5 AM 9:16
DIVISION OF STATE
TALLAHASSEE, FLORIDA

**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: ACTION LENDING & INVESTMENT, INC
2. The principal office address: 2800 Weston Rd, Suite 202, Weston, FL 33331

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/03/2007 Document number: P07000109622

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)

Juan Carlos Zurita

2800 Weston Rd, Suite 202

Weston, FL 33331

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

Juan Carlos Zurita

2200 North Commerce Parkway, Suite 110

P.O. Box NOT acceptable

Weston, FL 33326

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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

Juan Carlos Zurita
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

09/15/2011
Date

If signing on behalf of an entity:

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 (8/05)