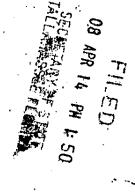
PU800000 24880

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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: Florida Credit Corp. (Name of Corp.	oration)
	(Number of Corp	oration
DOC	UMENT NUMBER: P08000024880	
The er	nclosed Statement of Change of Registered Office/A	gent and fee are submitted for filing.
Please	e return all correspondence concerning this matter to	the following:
	Jodi Parsons	
	(Name of Contact	t Person)
	Florida Credit Corp.	
	(Firm/Comp	any)
	4320 Deerwood Lake Pkwy., Ste 1 (Address	
	Jacksonville, Florida 32216	
	(City/State and 2	ip Code)
For fu	rther information concerning this matter, please call:	i i
Jodi F	Parsons a	at (904) 720-5255
	(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclos	sed is a \$35.00 check made payable to the Departmen	nt of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle
	- 	Tallahassee, FL 32301

TO:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes, this nized under the laws of the State of Florida tered agent, or both, in the State of Florida.
1. The name of	the corporation: Florida Credit Corp.	
2. The principa	l office address; 6815 Atlantic Blvd. Ste.	3, Jacksonville, Florida 32211
		٠. لسم
3. The mailing	address (if different): 4320 Deerwood La	ake Pkwy. Ste.101, #435, Jacksonville, Florida 32216
4. Date of incom	rporation/qualification: 03/10/2008	Document number: P08000024880
	nd street address of the current registered arriment of State:	agent and registered office on file with the
	Jodi Parsons	•
	6404 Merrill Rd. Ste. A	
	Jacksonville, Florida 32277	
6. The name an (if changed):	nd street address of the new registered age	ant (if changed) and /or registered office
	Jodi Parsons	
	6815 Atlantic Blvd. Suite 3	
	(P.O. Box NOT acceptable	B)
	Jacksonville, Florida 32211	
The street addr as changed wil	ress of its registered office and the stree	t address of the business office of its registered agent,
Such change wauthorized by	vas authorized by resolution duly adopte the board, or the corporation has been n	ed by its board of directors or by an officer so otified in writing of the change.
(Signa	ture of an officer or director)	(Printed or typed name and title)
I hereby accep I further agree of my duties, a document is be corporation ha	of the appointment as registered agent as to comply with the provisions of all sta and I am familian with and accept the ob- eing filed merely to reflect a change in t as been potified in writing of this change	nd agree to act in this capacity tutes relative to the proper and complete performance ligation of my position as registered agent. Or, if this he registered office address, I hereby confirm that the e.
XXXII	Llasous	04/11/2008
(S	ignature of Registered Agent)	(Date)
If signing on b	ehalf of an entity:	
	(Typed or Printed Name)	

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