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COVER LETTER

Division of Corporations SUBJECT: ORLANDO FINANCIAL PARTNERS, INC.

Name of Corporation DOCUMENT NUMBER: P090000 905 16 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: MICHELLE BELL

Name of Contact Person ORLANDO FINANCIAL PARTNERS, INC.
Firm/Company 734 CENTERVALE DRIVE
Address CELE BRATION, FL 34747

City/State and Zip Code CLIFF @ NYE, NET

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CLIFFORD W-BURGETT at (440) 665-8635

Name of Contact Person 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

TO:

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 FLORIDA		
in order to change its registered office or registered agent, or both, in the State of Florida.		
1. The name of the corporation: ORLANDO FINANCIAL PARTNERS, INC.		
2. The principal office address: 4200 SW 55TH CIRCLE		
3. The mailing address (if different): (SAME)		
3. The mailing address (if different): (SAME)		
4. Date of incorporation/qualification: 11/2/2009 Document number: P0900090516		
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)		
BELL, MICHELLE		
4200 SW SSTHCIRCLE		
OCALA, FL 34474		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		
BELL, MICHELLE		
734 CENTER VALE PRIVE P.O. Box NOT acceptable		
CELEBRATION, FL 34747		
The street address of its registered office and the street address of the business office of its registered 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 objector director CLIFFORD W- BURGETT, PRESID-NOT		
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.		
Michella Bell 4/18/2010 Signature of Registored Agent Date		
If signing on behalf of an entity:		
Typed or Printed Name		
* * * FILING FEE: \$35.00 * * *		