

PI0000078479

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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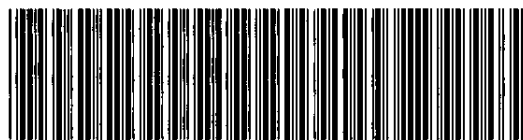
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A.

TB

NOV - 4 2010

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** National Settlement Solutions, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P10000078479

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:

Matthew S. Taylor  
Name of Contact Person

Matthew S. Taylor, P.A.  
Firm/Company

13077 164th Court North  
Address

Jupiter, Florida 33478  
City/State and Zip Code

jsimons@discountdebt.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew S. Taylor at ( 561 ) 743-1505  
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

**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: National Settlement Solutions, Inc.
2. The principal office address: 1645 Palm Beach Lakes Boulevard, Suite 480, West Palm Beach, Florida 33401
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 09/27/2010 Document number: P10000078479

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)

Filings, Inc.

3732 N.W. 16th Street

Fort Lauderdale, Florida 33311

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

Jason Simons

1645 Palm Beach Lakes Boulevard, Suite 480

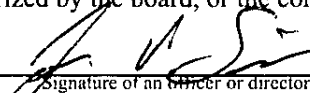
P.O. Box NOT acceptable

West Palm Beach, Florida 33401

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**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

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 of an officer or director

Jason Simons  
\_\_\_\_\_  
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 of Registered Agent

10/8/10  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Jason Simons  
\_\_\_\_\_  
Typed or Printed Name

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