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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(business chity Name)	
(Document Number)	
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C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations Florida Pawn Management Management, Inc Name of Corporation 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: Phil Iovino Name of Contact Person Florida Pawn Management Management, Inc. Firm/Company 7561 49th St N Address Pinellas Park, FL 33781 City/State and Zip Code piovino@pawnshopmgmt.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Carolyn Karn Name of Contact Person

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, 6 statement of change is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this
in order to change its registered office or	registered agent, or both, in the State of Alesiaa8 AM 8: 22
1. The name of the corporation: Florida Pawn	Management Management; Inc.
2. The principal office address: 1430 E Fowle	er Ave, Tampa, FL 33612
3. The mailing address (if different):	
4. Date of incorporation/qualification:	Document number: P11000016175
5. The name and street address of the current regis Florida Department of State: (If resigned, enter	tered agent and registered office on file with the
Phil lovino	
1038 Greywood Ave	
Tarpon Springs, FL 346	889
6. The name and street address of the new registere (if changed):	ed agent (if changed) and /or registered office
Phil Iovino	
3101 Evewood Ct	
Р.О. В Holiday, FL 34690	Box NOT acceptable
The street address of its registered office and the as changed will be identical.	street address of the business office of its registered agent,
Such change was authorized by resolution duly a authorized by the board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.
Signature of an officer or director	Adrian Polk, Director
I hereby accept the appointment as registered as	,,
Rossi	08/25/2014
Signature of Registered Agent	Date
If signing on behalf of an entity:	
Phil Iovino Typed or Printed Name	
* * * FILIN	IG FEE: \$35.00 * * *

Florida Pawn Management Management, Inc.

1430 E Fowler Ave Tampa, FL 33612

August 25, 2014

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sirs:

Enclosed please find a payment and change of address for the registered agent for the following companies:

Florida Pawn Management Management, Inc. A&M Pawn Management, Inc. MVP Pawn Management, Inc. Florida Pawn Management, Inc.

'If you require any additional information, please feel free to contact me.

Sincerely,

Office Manager