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JUL 24 2014 R. WHITE

## **COVER LETTER**

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filin Please return all correspondence concerning this matter to the following:    Jerry Fadgen, CPA   Name of Contact Person     Jerry Fadgen & Co   Firm/Company     21 East Acre Drive   Address
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filin Please return all correspondence concerning this matter to the following:    Jerry Fadgen, CPA
Jerry Fadgen, CPA  Name of Contact Person  Jerry Fadgen & Co  Firm/Company  21 East Acre Drive  Address
Jerry Fadgen, CPA  Name of Contact Person  Jerry Fadgen & Co  Firm/Company  21 East Acre Drive  Address
21 East Acre Drive Address
21 East Acre Drive
·
City/State and Zip Code  jerryfad@aol.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jerry Fadgen954 \ 584 9786
Jerry Fadgen Name of Contact Person  at (954) 584 9786 Area Code & Daytime Telephon

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

statement of cha	nge is submitted for a corpora	92, 617.0502, 607.1508, or 617.1508, Florida ation organized under the laws of the State of se or registered agent, or both, in the State of	Florida
1. The name of t	Harinar	n Finance Holdings, Inc	1107.000.
	ine corporation.	cre Drive, Plantation, FL 33317	
3. The mailing a	ddress (if different): POBC	ox 489, Fort Lauderdale, FL 333	02
4. Date of incorp	poration/qualification: 03/19	9/2012 Document number: P120	00028135
	I street address of the current r tment of State: (If resigned, er	registered agent and registered office on file v	with the
	RESIGNED		_
			_
		· ·	-34:
6. The name and (if changed):	l street address of the new regi	istered agent (if changed) and /or registered o	office (=
	JERRY FADGEN, C	PA	
	21 EAST ACRE DRIV		- 100 - 12 - 17 - 18 - 17 - 18 - 17 - 18 - 17 - 18 - 17 - 18 - 17 - 18 - 18
	PLANTATION, FL 3	P.O. Box NOT acceptable	
The street address changed will	ess of its registered office and be identical.	d the street address of the business office of	its registered agent,
Such change wa authorized by the	as authorized by resolution dune board, or the corporation h	aly adopted by its board of directors or by areas been notified in writing of the change.	
Sym 1.	huldrii	Sylvia Baldini - Directo	
I furthér agr <b>é</b> e performance of	the appointment as registere to comply with the provisions my duties, and I am familiar	ed agent and agree to act in this capacity.  Is of all statutes relative to the proper and co  with and accept the obligation of my positic  rely to reflect a change in the registered off,  n notified in writing of this change.	omplete on as registered
Que	20c	_ 06/30/2014	
Sig	nature of Registered Agent	Date	
It signing on be	half of an entity:		
Т'	vped or Printed Name		

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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