

P/2000101173

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

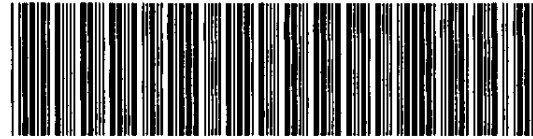
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500243450065

01/09/13--01013-015 **35.00

FILED
13 JAN - 9 AM 8:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA-Ad
Chong

SJ 1-11-13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NATIONSWAY FINANCIAL SERVICES, INC
Name of Corporation

DOCUMENT NUMBER: P12000101173

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:

CARLTON B. FERGUSON
Name of Contact Person

NATIONSWAY FINANCIAL SERVICES, INC
Firm/Company

6635 W. COMMERCIAL BLVD; STE 204
Address

TAMARAC, FL 33319
City/State and Zip Code

MYHOME@NATIONSWAYFSI.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARLTON B. FERGUSON at (407) 346-4406
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: NATIONSNAY FINANCIAL SERVICES INC.
2. The principal office address: 6635 N. COMMERCIAL BLVD. SUITE 204
TAMARAC, FL 33319
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 12/12/2012 Document number: P12000101173

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)

<u>AGENT: CARLTON B. FERGUSON</u>	<u>CORPORATION</u>
<u>17782 ASHFORD GRANDE WY</u>	<u>NATIONSNAY FIN SERVICES INC</u>
<u>ORLANDO, FL 32820</u>	<u>9354 NW 49 PL</u>
	<u>SUNRISE, FL 33351</u>

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

6635 N. COMMERCIAL BLVD. SUITE 204
P.O. Box NOT acceptable
TAMARAC, FL 33319

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 also authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

CARLTON B. FERGUSON
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]
Signature of Registered Agent

12/31/2012
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)