P14000043578

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ANTANYES AND FILED



COVER LETTER

TO: Amendment Sec Division of Corp	tion orations	
SUBJECT:	Name of	Corporation
DOCUMENT NUMBE	R: P14000043578	
The enclosed Statement	of Change of Registered Offi	ice/Agent and fee are submitted for filing.
Please return all correspo	ondence concerning this matt	er to the following:
	Mauhen D. Gell Name of C	oa et
	Name of C	ontact Person
	Cash Inn or 7th	Avenue, Inc.
	Firm/C	Company
	13100 NW 714	Avenue
	Ad	dress
	Miami, FL 33162 City/State:	and Zip Code
E-m	cashingiewelme gmainail address: (to be used for	future annual report notification)
For further information of	concerning this matter, please	e call:
Matthew D.	Crelbart	at (954) 592-7741 Area Code & Daytime Telephone Number
Name of	Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 che	ck made payable to the Depa	artment of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	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 in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Cash In of 7th Avenue, Inc.
2. The principal office address: 13100 No 7th Avenue
Miami, FL 33168
3. The mailing address (if different): 13100 NW 714 Avange
Miami, Fc 33168
4. Date of incorporation/qualification: 65/15/20/19 Document number: P14000043 578
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)
Martin, Nancy
7214 Mckinley St
Hollywood, FL 33624
TALE: 7
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Origant, Crimella A.
1351 4W 141 Avenue # 3076 P.O. Box NOT acceptable
P.O. Box NOT acceptable Pembroke Pines, FL 33027 Pembroke Pines, FL 33027
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 of the change.
authorized by the board of the corporation has been notified in writing of the change.
Signature of an office or director Matthew D. Gelbert President 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.
Thomas 10-29-2014
Signature of Registered Agent Date
If signing on behalf of an entity:
Typed or Printed Name

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