P92000015231

(Reque	estor's Name)	
(Addre	ss)	
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(City/S	tate/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busin	ess Entity Nar	me)
(Docur	nent Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	



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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Alexander Mortgage Corp. (Name of Corporation)		
DOCUMENT NUMBER: 92 000015 231		
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:		
Tris Ramirez (Name of Contact Person)		
(Name of Contact Person)		
Alexander Mortgage Corp.		
(Firm/Company) ZZI W. Hallandale Beach Blvd. Suite 204, (Address)		
Hallandale 7/. 33009 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Name of Contact Person) at 954 455-3366 × 114 (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 <u>Thrida</u>
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Alexander Mortgage Corp.
2. The principal office address: 221 W. Hallandale Beach Bouleva
Suite 204, Hallandale, 71. 33009
3. The mailing address (if different):
4. Date of incorporation/qualification: 2/15/06 Document number: P9200001523
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State
Jettrev Teinberg
41000 Holly IR 10 15 Suite 350
11 11 1011 Wood Doute Vala Juli
Hollywood, H. 33021
6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):
Sherri Vacoby
120/Did Did Silver
(P.O. Box NOT accordable)
Augustura 7/ 23120 mg =
To ?
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.
authorized by the board, or the corporation has been notified in writing of the change.
Shevri Vacoby PD
(1)
i hereby accept the appointment as registered agent and agree to act in this supacity. I further agree to comply with the provisions of gent and agent the complete performance of my dutient and I am familiar with and accept the chlication of my dutient and agent to be ichie
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.
obsparation into seem nonlinear in writing by and change.
(Signature of Registered Agent)
If signing on behalf of an entity:

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

(Typed or Printed Name)