

P93 000057486

Alliance Capital Factoring Group, Inc.
Requester's Name

2300 Glades Road, Suite 200 West
Address

Boca Raton, Fla. 33431-7386
City/State/Zip Phone #

NO Return

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #) 700003469217--1
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- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☒ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

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TALLAHASSEE, FLORIDA

T. LEWIS NOV 28 2000

Examiner's Initials

Charter No.: P93000057486

Date Filed: August 9, 1993

**STATEMENT OF CHANGE OF REGISTERED OFFICE
AND REGISTERED AGENT**

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statements for the purpose of changing its registered office and registered agent in the State of Florida.

1. The name of the corporation is: **ALLIANCE CAPITAL FACTORING GROUP, INC.**

2. The name and address of its present registered agent is:

**Conlon, Jo Anne M.
2300 Glades Rd., 200 West
Boca Raton, FL**

3. The name and street address to which its registered agent is to be changed is: (P.O. BOX NOT ACCEPTABLE)

**MERRILL A. BOOKSTEIN
COUNSELOR AT LAW, P.A.
2499 Glades Road, Suite 101
Boca Raton, FL 33431**

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4. The street address of its registered office and the street address of the business office of its registered agent, as changed are identical.

5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors.

Jo Anne Conlon
President

Signature *Jo Anne M. Conlon*
Date: 11/14/00

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISION 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 UNDER SECTION 607.0505, FLORIDA STATUTES.

Print/Type Name **Merrill A. Bookstein, Esquire**

Signature *[Signature]*
(Agent)

Date 11/13/00

FILING FEE \$35