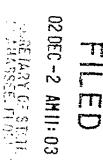
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(Re	equestor's Name)	
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		-	
SUBJECT: Florida Title	Loans, Inc. (Name of corporation)	=	
DOCUMENT NUMBER:	•		
	• •	and for one authorities of for filling	
The enclosed Statement of Chang		9	
Please return all correspondence	concerning this matter to the fo	ollowing:	
Dana G. Bradford II (Name of pe	erson)	<u></u> . <u>-</u>	
Smith, Gambrell & Russel (Name of firm/c			
50 N. Laura Street, Suit			
Jacksonville, Florida 3 (City/state and 2	2202 ap code)	- 	
For further information concerning	g this matter, please call:	*	:
Dana G. Bradford II (Name of person)	at (904) (Area code &	598_6100 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 409 E. Gaines Street Tallahassee, FL 32399		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	e provisions of sect.			==			itutes,
•	f change is submitte in order to c	• •	_		. •		Stata
of Florida.	in order to c	nunge us registe.	eu office	_ <u>÷</u> ÷	eu agem,	or both, in the	State
*	the corporation:	Florida Tit	le Loans	s, Inc.	, ,		
•		0607 Dunison	der Diago		406		·
2. The principal	office address:	8601 Dunwoo			400		
<u> </u>		Atlanta, Ge	orgia .	30350	/mus ± ±	·	*
3. The mailing	address (if different)):		=======================================			
_				<u></u>		ری مب	
4. Date of incor	poration/qualification	on: 5/2/1994		Documen	t number:	P940000338	28
5. The name an	d street address of t	ne current register	ed agent a	nd register	red office o	on file with the	-2
	rtment of State:			* <u>*</u>		iš-≺ Mo	
	CT Corpo	ration System				ن بر	=
	, ,	Pine Island R				PRI PRI	: 03
			33324			Qm	ယ
							
6. The name as	nd street address of	f the new register	ed agent ((if change	d) and /or	registered off	ice (if
changed):	Dana G.	Bradford II		=	-		
		ambrell & Rus	sell, Lī	JP -			
	50 N. La	ura Street, S P.O. Box or personal ma	uite 220	00	<u> </u>	 _	•
		·		epiaoles =			
_		ille, Florida		. :-			
agent, as chang	ess of its registered ed will be identical				•	_	
Such change wanthorized by	as authorized by re he/bbard, or the con	solution duly ado poration has beer					
(Signature of an object	r chairman or vice chairman	of the board)	John J	. McCl	oskey,	Secretary	7
I hereby decept I further deree performance of registered ager	the appointment a to comply with the my duties, and I au it. Or, if this docum I hereby confirm th	s registered agen provisions of all n familiar with a nent is being filed	t and agre statutes re nd accept ' merelv to	re to act in clative to to the obliga o reflect a	this capa he proper tion of my change in	city. and complete position as the registered	·
A SUITE	Sensure of Registered Agen	<u>,,</u>		11-7	11-02 Date)		
If signing on beha		•		<u> </u>			
			<u>:</u> سِي		· •	· 11	
, (Typed or Printed Name)			(C	Capacity)		_

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