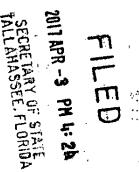
## P94000049937

(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:  Land Noriegg  Advised to white  In Claudius Noriega  As NEW RA		



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I ALBRITTON

TO:	Amendment Section Division of Corporations
SUBJE	CT: Great American Capital Corp. Name of Corporation
DOCU	MENT NUMBER: 794000049537
The enc	losed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
•	Car / Noringa Name of Contagnerson
	Great American Cap tal Corp. Firm/Company
	2690 Wester Mad Saite 20. Address
	Address  Weston, Floring 33331  City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For furti	her information concerning this matter, please call:  \[ \langle \text{Nor.cga} & \text{at} & \text{454} & \text{400 - 5C4} \]  Name of Contact Person \[ \text{Area Code & Daytime Telephone Number} \]
	Traine of Contact Forson Area Code of Daytine 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

CR2E045 (03/12)

TO:



March 29, 2017

CARL NORIEGA GREAT AMERICAN CAPITAL CORP 2690 WESTON RD., STE. 200 WESTON, FL 33331

SUBJECT: GREAT AMERICAN CAPITAL CORP.

Ref. Number: P94000049937

We have received your document for GREAT AMERICAN CAPITAL CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Please type/print information clearly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 717A00006022

Division of Companytions D.O. DOV 6207 Mollahorman Florida 2021

## 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 Flori da
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Great American Cap. tal Corp.
2. The principal office address: 2690 We ten Mond In Fe 200
puster, Planta 33331
3. The mailing address (if different):
5. The maning address (it difficient).
4. Date of incorporation/qualification: 1/4/1994/Document number: 794600049937
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)
Co. 1 No. 200
Hiso Wester Read, Lente 20.
Wester, Planda 33331
6. The name and street address of the new negistered agent (if changed) and /or registered office
(if changed): Nortega Nortega
2690 beston Mearl Suite 200 872 00 1
Weston Flor de 33731
The street address of its registered office and the street address of the business office of its registered age:  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.
Signature of an officer or director Printed or typed gathe 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 his 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.
Claudous Roscege March 21 2017 Signature of Registered Agent ) Date
If signing on behalf of an entity:
Typed or Printed Name

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

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