

P96000006847

CARLTON FIELDS

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(City/State/Zip/Phone #)

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(Business Entity Name)

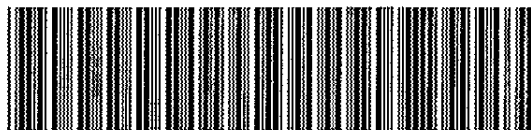
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R.A. change

T BROWN DEC - 4 2002

**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
FLORIDA in order to change its registered office or registered agent, or both, in the State
of Florida.

1. The name of the corporation: FASI INVESTMENTS CORP.
2. The principal office address: 1150 NW 183RD DRIVE
MIAMI, FL 33169
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 01/18/1996 Document number: P96000006847
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:
AMERICAN INFORMATION SERVICES, INC.
ONE SOUTHEAST THIRD AVE., 28TH FLOOR
MIAMI, FL 33131
6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed):
CFRA, LLC
ONE HARBOUR PLACE, 5TH FL, 777 S. HARBOUR ISLAND BLVD.
(P.O. Box or personal mailboxes NOT acceptable)
TAMPA, FL 33602-5730

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.

Albert Molina
(Signature of an officer, director or vice chairman of the board)

ALBERT MOLINA, 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.*

(Signature of Registered Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Date)

11-22-02

Vice President

(Capacity)

Peter J. Winders *** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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