

P96000036172

Requester's Name _____
Address _____
City/State/Zip _____ Phone # _____

000003147690--6
-02/25/00--01066-010
*****35.00 *****35.00

Office Use Only

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

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ 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

FILED
00 APR 28 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P96000036172
EAC
380 4-28-00



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 9, 2000

KIMBERLY DAISE
1236 SE 4TH AVENUE
FT. LAUDERDALE, FL 33301

SUBJECT: AMERICAN MULTICREDIT COMPANY
Ref. Number: P96000036172

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

We are enclosing the proper form(s) with instructions for your convenience.

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) 487-6916.

Carol Mustain
Corporate Specialist

Letter Number: 600A00013175

RECEIVED
00 MAY - 1 AM 9:51
DIVISION OF CORPORATIONS

**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, the undersigned corporation organized under the laws of the State of _____ submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: American Multicredit Company, Inc.
2. The mailing address of the corporation is: 1000 Corporate Blvd. Suite 302
Ft. Lauderdale, FL
3. Date of incorporation/qualification: April 22, 1996 Document number: P960000036172
4. The name and address of the current registered agent and office:
Richard I. Blinderman, Esq.
3111 Stirling Rd.
Ft. Lauderdale, FL 33312-6525
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Kimberly S. Daise, P.A.
1236 S. E. 4th Ave
Ft. Lauderdale, FL 33316

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.

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

4/18/00
(Date)

Estuardo Benavides, President
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

Kimberly S. Daise
(Typed or Printed Name)

(Capacity)

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