199700036784

3325 S. University Drive # 101 • Davie, Florida 33328 Tel: (954) 581-0400 • Fax: (954) 581-0447

CR2E031(7/97)

Office Use Only

Examiner's Initials

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

| I. | | |
|--|--|--|
| (Corporation Name) | (Document #) | |
| 2 | | |
| (Corporation Name) | (Document #) 60000441864 5—2 -06/13/0101098019 ******35.00 ******35.00 | |
| (Corporation Name) | (Document #) | |
| 4(Corporation Name) | (Document #) | |
| ☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait | ☐ Certified Copy ☐ Photocopy ☐ Certificate of Status | |
| NEW FILINGS Profit Not for Profit Limited Liability Domestication Other | AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger | |
| OTHER FILINGS | REGISTRATION/QUALIFICATION | |
| Annual Report Fictitious Name | Foreign Limited Partnership Reinstatement Trademark Other | |

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

| Pursuant to the provisions of sections 607.0502 , $6^{17.0502}$, 607.1508 , or 617.1500 he undersigned corporation organized under the laws of the State of | 08, Florida Statutes, |
|---|---|
| ubmits the following statement in order to change its registered office or registere | ed agent, or both, in |
| he State of Florida. | |
| The name of the corporation Equitable tunding TYO | 100 COYP |
| | |
| 2. The mailing address of the corporation 3325 S. UNIXYSITI | 1 DRIVE #101 |
| 3. Date of incorporation/qualification: Document number: | |
| § | |
| 4. The name and address of the current registered agent and office: | |
| <u> Hoxana Ylo</u> | |
| 6050 Sux 55 PL | , |
| DAVIE FI 33314. | FE O |
| 5. The name and address of the new registered agent (if changed) and/or registered | office (fichanged): |
| (P. O. Box Not Acceptable) | |
| Raul Quintara | |
| 3325 S. UNIVERSITY DR # 10 | |
| DAME F1 33314. | ORAL OR |
| The street address of its registered office and the street address of the business of agent, as charged, will be identical. | fice of its registered |
| Such change was authorized by resolution duly adopted by its board of directors of authorized by the board. | or by an officer so |
| aumorized by the board. | 16/01 |
| (Signature of an officer, chairman or vice chairman of the board) | Date) |
| Boxana Pro-President-Registered ag |) |
| Having been named as registered agent and to accept service of process for the acceptation, I hereby accept the appointment as registered agent and agree to ac I further agree to comply with the provisions of all statutes relative to the proper performance of my duties, and I am familiar with and accept the obligation of my registered agent. | nbove stated ct in this capacity. and complete v position as |
| 6-6- | 2001 |
| (Signature of Registered Agent) (Date) | · · · · · · · · · · · · · · · · · · · |
| If signing on behalf of an entity: | |
| (Typed or Printed Name) (Capacity) | |
| ጵያ ያጠር መስመ ውዕደ ሰብ <u>ጵ</u> ጵ ም | |
| * * * FILING FEE: \$35.00 * * * | |
| CR2F045(9/00) | |

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314