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## **COVER LETTER**

Amendment Section

Division of Corporations						
SUBJECT: Premier Funding Group. (Name of Corporation)						
DOCUMENT NUMBER: P 98 000 00 7420						
DOCUMENT NUMBER: 198000000000000000000000000000000000000						
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Cecilia Garcia (Name of Contact Person)						
Premier Funding Grave.  (Firm/Company)						
(Firm/Company)						
12110 TOPICAL WAY (Address)						
Pinerrost, EL 3356.						
(City/State and Zip Code)						
For further information concerning this matter, please call:						
(Name of Contact Person) at (305) 275 5255 (Area Code & Daytime Telephone Number)						
Enclosed is a \$35.00 check made payable to the Department of State.						
Mailing Address: Amendment Section  Street Address: Amendment Section						

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

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

	of sections 607.0502, 617.05			
	nitted for a corporation orga its registered office or regist			<u>·</u>
in order to change			Situle of Providu.	-0
1. The name of the corporat	ion:Premi	er runaing	Group ,I'	<u> </u>
2. The principal office addre	ess: 121107	ropical w	ay	· '5 ·
3. The mailing address (if d	ifferent):			
4. Date of incorporation/qua	alification: 17299	8 Document number:	P98000	00742
5. The name and street addr Florida Department of St	ress of the current registered ate: Cecilia (	agent and registered office TOPCIA 86 CF	on file with the	William P.C.
	Miami	R 33154		LI PH 3:
6. The name and street addr (if changed):	ress of the new registered age  CCIIIA  DINECTEST  (P.O. Box NOT acceptable)	Tarcla DICAL WAY FL 3315L	$\sqrt{2}$	23
The street address of its re as changed will be identicated	gistered office and the stree	et address of the business	office of its registered	agent,
Such change was authorized by the board, of	d by resolution duly adopted the corporation has been n	ed by its board of director	rs or by an officer so hange.	
(Signature of empitice	0 00	Cecil	_	
	stment as registered agent a with the provisions of all sta iliar with and accept the ob crely to reflect a change in t fied in writing of this chang	and agree to act in this ca atutes relative to the prop bligation of my position a the registered office addr te.		rmance r, if this hat the
If signing on behalf of an	entity:			
Cecilia 6	AKCTA			
(Typed or Printe	d Name)			

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