

P98000061719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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FILED
2006 OCT 25 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts OCT 25 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mortgage Capital & Consulting Group, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P98000061719

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:

Jaime Muriel
(Name of Contact Person)

Mortgage Capital & Consulting Group, Inc.
(Firm/Company)

6820 Lyons Technology Circle, Suite 150
(Address)

Coconut Creek, FL 33073
(City/State and Zip Code)

For further information concerning this matter, please call:

Jaime Muriel at (954) 571-4220
(Name of Contact Person) (Area Code & Daytime 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 6, 2006

JAIME MURIEL
MORTGAGE CAPITAL & CONSULTING GROUP, INC
6820 LYONS TECHNOLOGY CIRCLE STE 150
COCONUT CREEK, FL -3

SUBJECT: MORTGAGE CAPITAL & CONSULTING GROUP, INC.
Ref. Number: P98000061719

We have received your document for MORTGAGE CAPITAL & CONSULTING GROUP, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Registered agent must sign form.

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) 245-6892.

Tina Roberts
Document Specialist

Letter Number: 406A00059471

RECEIVED
OCT 25 AM 8:00
DIVISION OF CORPORATIONS

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

FILED

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute, a 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.

2008 OCT 25 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the corporation: (has not changed) Mortgage Capital & Consulting Group, Inc.
2. The principal office address: 6820 Lyons Technology Circle, Suite 150 Coconut Creek, FL 33073
3. The mailing address (if different): same
4. Date of incorporation/qualification: 07/10/1998 Document number: P98000061719
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Luis Gonzalez

6810 Lyons Technology Circle, Suite 100

Coconut Creek, FL 33073

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

\ (same registered agent)

6820 Lyons Technology Circle, Suite 150

(P.O. Box NOT acceptable)

Coconut Creek, FL 33073

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.


(Signature of an officer or director)

Jaime Muriel - Officer

(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)

10/23/06

(Date)

If signing on behalf of an entity:

not applicable

(Typed or Printed Name)

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

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

CR2E045 (8/05)