P98000068577

PLCS CAJH ADVANCE WX

— 10612 Bridgeport WAY SW.

Lakewood WA 98499

City/State/Zip Phone #



Office Use Only

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

| 1 | |
|--|--|
| (Corporation Name) | (Document #) |
| 2 | 6000035028UU1 |
| (Corporation Name) | (Document #) |
| 3. | |
| (Corporation Name) | (Document #) |
| 4. | |
| (Corporation Name) | (Document #) |
| ☐ Walk in ☐ Pick up time | Certified Copy |
| ☐ Mail out ☐ Will wait | Photocopy |
| 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 |

Examiner's Initials

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, Fforida Statutes, |
|--|
| the undersigned corporation organized under the laws of the State of Florida |
| 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: FLCS Cash Advance Inc. |
| |
| 2. The mailing address of the corporation: 10612 Bridgeport Way SW Lakewood WH 98499 |
| Lakewood WA 98499 |
| 3. Date of incorporation/qualification: <u>Ob/os/98</u> Document number: <u>P98 - 68577</u> |
| 4. The name and address of the current registered agent and office: |
| Louise Beaird |
| 43 N. Navy Blud. |
| Pensacola FL 32507 |
| 5. The name and address of the new registered agent (if changed) and/or registered office (if changed): |
| (P. O. Box Not Acceptable) |
| Harold D. Rilling |
| Harold D. Rilling 2310-G W. Waters Av. |
| Tampa, FL 33604 |
| 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, charifman or vice chairman of the board) (Date) |
| (Signature of an officer, chairman or vice chairman of the board) (Date) |
| Lorenz C. Gill (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) |
| (Light to the state of the stat |
| If signing on behalf of an entity: HARDA D RILLING REGIONAL MANGACER (Typed or Printed Name) (Capacity) |
| (Typed of Filmed Ivalue) (Capacity) |

CR2E045(9/00)

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