

P99000077161

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: National Lien Corporation

(Name of corporation)

DOCUMENT NUMBER: P99000077161

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:

Dwaine Foray

(Name of person)

National Lien Corporation

(Name of firm/company)

318 Indian Trace, #543

(Address)

Weston FL 33326

(City/state and zip code)

For further information concerning this matter, please call:

Dwaine Foray

(Name of person)

at (954)

385-8800

(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
409 E. Gaines Street
Tallahassee, FL 32399

**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, this 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.

1. The name of the corporation: National Lien Corporation
2. The principal office address: 2900 Glades Circle, Suite 325, Weston FL 33326
3. The mailing address (if different): 318 Indian Trace, #543, Weston FL 33326
4. Date of incorporation/qualification: August 30, 1999 Document number: P99000077161

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Edward Kreiling

2668 Edgewater Drive

Weston FL 33332

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

Dwaine Foray

2900 Glades Circle, Suite 325

(P.O. Box or personal mailbox NOT acceptable)

Weston FL 33327

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.

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

Dwaine Foray, President

(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.

7/22/2003

Dwaine Foray
(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

Dwaine Foray

President

(Typed or Printed Name)

(Capacity)

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

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA