

P99000107869

Requester's Name

**Value Leasing Company, Inc.**

Aventura Corporate Center  
20801 Biscayne Blvd. Suite 403  
Aventura FL 33180

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 APR 27 AM 10:48

Office Use Only

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

1. \_\_\_\_\_  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #) 600003226516--1  
-04/27/00--01048--001  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ 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**

- ☐ Annual Report  
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

V. SHEPARD MAY 5 2000

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, Florida 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: VALUE LEASING COMPANY, INC.
2. The mailing address of the corporation: 20801 BISCAYNE BLVD Suite 403  
AVENTURA FLORIDA 33180
3. Date of incorporation/qualification: Dec 14, 1999 Document number: P99000107869
4. The name and address of the current registered agent and registered office:  
Resigned
5. The name and address of the new registered agent (if changed) and /or registered office (if changed):
- FILED  
SECRETARY OF CORPORATION  
DIVISION OF CORPORATION  
00 APR 27 AM 10:48

MORRIS KLEIMAN  
1602 ALTON RD. P.M.B. 494  
MIAMI BEACH FLORIDA 33139

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.

Morris K. Glinian - PRES  
(Signature of an officer, chairman or vice chairman of the board)

APRIL 13, 2000  
(Date)

MORRIS KLEMAN  
(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)

APRIL 13, 2000  
(Date)

**If signing on behalf of an entity:**

(Typed or Printed Name)

(Capacity)

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