509488

(Re	questor's Name)	
(Ad	dress)	
(Ade	dress)	
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, (Cit	y/State/Zip/Phone	e #)
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PICK-UP	■ WAIT	MAIL
(Bus	siness Entity Nan	ne)
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to F	Filina Officer:	
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SECRETARY OF STATE
AHASSEF, FLORID

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COVER LETTER

Division of Corporations
SUBJECT: Pioneer Military Lending of Florida, Inc.
(Name of Corporation)
DOCUMENT NUMBER: S09488
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:
Cathi Wall
(Name of Contact Person)
National Corporate Services, Inc. (Firm/Company)
(1 init/Company)
2 Club Centre Court, Suite 5
(Address)
Edwardsville, IL 62025
(City/State and Zip Code)
For further information concerning this matter, please call:
Cathi Wall at (866) 416-6274
(Name of Contact Person) at (866) 416-6274 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Street Address:
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle
Tallahassee, FL 32301

TO: Amendment Section

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
	the corporation:Pioneer Military Lending of Florida, Inc.
	office address: 4700 Belleview Avenue, Suite 300, Kansas City, MO 64112
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 10/29/90 Document number: S09488
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State:
	Corporation Service Company
	1201 Hays Street
	Tallahassee, FL 32301
6. The name and (if changed):	Tallahassee, FL 32301 I street address of the new registered agent (if changed) and /or registered office
	NRAI Services, Inc. 2731 Executive Park Drive, Suite 4
	2731 Executive Park Drive, Suite 4
	(P.O. Box NOT acceptable) Weston, FL 33331
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
(Signate	Sean L. Emerick, Vice President under Power of Attorney (Printed or typed name and title)
I hereby accept I further agree i of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Mul	mature of Registered Agent) 12/8/06
' // (half of an entity:
Brenda L. Wh	ite, Assistant Secretary
<u>(1)</u>	yped or Printed Name)

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