

To: +1-506176380

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2022-02-09 12:52:17 CST

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From: James Tanks III

Division of Corporations

S 27451

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614) 573-3996
Fax Number : (954) 208-0845

**Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: _____

2022 FEB - 7 PM 12:46
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SECRETARY OF STATE
TALLAHASSEE, FL

REGISTERED AGENT CHANGE
MID-ATLANTIC FINANCE CO., INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

RA/Rich

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TALLAHASSEE, FL

Requesting the original filing date of 2/7/22, thank you!

FEB 10 2022
ALBRITTON

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: Mid-Atlantic Finance Co., Inc.

2. The principal office address: 4592 UImerton Road, Suite 200, Clearwater, FL 33762

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 1/25/1991 Document number: S27451

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Godri, Matthew C.
4592 ULMERTON ROAD Suite 200 CLEARWATER, FL 33762

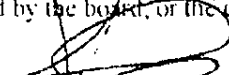
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System
1200 South Pine Island Road
Plantation, Florida 33324
P.O. Box NOT acceptable

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TALLAHASSEE, FL

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

Kimberly Bowens - Assistant Secretary

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.

C T Corporation System
By: Ternell Kearney

Signature of Registered Agent

2/4/2022

Date

If signing on behalf of an entity:

Ternell Kearney

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 (04/13)