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Certified Copies	Certificates	of Status
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Special Instructions to f	Filing Officer:	
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FILED
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SECRETARY OF STATE

Office Use Only

R.A. Change

B 8/20/04

COVER LETTER

	ment Section n of Corporations
SUBJECT: Br	righten Lending, Inc. (Name of Corporation)
DOCUMENT	NUMBER:_F0700004050
The enclosed St	atement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all	correspondence concerning this matter to the following:
	Janice Null (Name of Contact Person)
	Incorp Services, Inc. (Firm/Company)
	375 N. Stephanie St., Suite 1411 (Address)
	Henderson, NV 89014-8909 (City/State and Zip Code)
For further info	rmation concerning this matter, please call:
Janice Null	at (702) 866-2500
+	(Name of Contact Person) (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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (8/05)

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 Statustatement of change is submitted for a corporation organized under the laws of the State of Calina in order to change its registered office or registered agent, or both, in the State of Florida.	lifornia
The name of the corporation: Brighten Lending, Inc.	
2. The principal office address: 11100 Valley Blvd. #218, El Monte, CA 91731	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 08/10/2007 Document number: F0700000	4050
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State;	ıe
NRAI SERVICES, INC.	z 2
2731 EXECUTIVE PARK DR STE 4	FIL 13
WESTON FL 33331 US	HATA HATA
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	3 PH 12: 42 RY OF STATE SEE. FLORID
Incorp Services, Inc.	Z: 42 TATE ORID
17888 67th Court North (P.O. Box, NOT acceptable)	DE 70
Loxahatchee, FL 33470	
The street address of its registered office and the street address of the business office of its reas changed will be identical.	gistered agent,
Such change was authorized by resolution duly adopted by its board of directors or by an off authorized by the board, or the corporation has been notified in writing of the change.	ficer so
(Signature of an officer or director) (Signature of an officer or director) (Printed or typed name and little)	PRESIDENT
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 comple of my duties, and I am familiar with and accept the obligation of my position as registered a document is being filed merely to reflect a change in the registered office address, I hereby a corporation has been notified in writing of this change.	ete performance igent. Or, if this confirm that the
Janue Jul on behalf 8/8/08 (Signature of Registered Agent) of Incorp Services, Inc. (Date)	
If signing on behalf of an entity:	
Janice Null on behalf of Incorp Services, Inc. (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 (8/05)