## F95000005338

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
- (Document Number)
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Special Instructions to Filing Officer:
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CL@S INFORMATION SERVICES 1425 RIVER PARK DRIVE, SUITE#110, SACRAMENTO, CA 95815-4508 Tel: (800) 447-6237

REF.#: 1156145	DATE: 8/1/03	
NAME(S): •  ACMC REALTY, INC.  ARCS COMMERCIAL MORTGAGE PARTNERSHIP	ECO., A CALIFORNIA LIMITED	
REQUEST FOR: • FLORIDA		
TYPE OF FILING: • CHANGE OF AGENT		
PLEASE FILE IMMEDIATELY UPON RECEIPT  IF THERE ARE ANY PROBLEMS, PLEASE HOLD THE FILING(S) AND CALL US FOR INSTRUCTIONS		
SPECIAL INSTRUCTIONS: • PLEASE FILE THE ATTACHED UPON RECEIPT. WE HAVE E ENVELOPE FOR YOUR CONVENIENCE IN RETURNING A ST WITH ANY QUESTIONS. THANK YOU IN ADVANCE.		
	,	
Enclosed is our check # 104064 not to exceed \$ appropriate amount used or send a receipt.	25.00 Please be sure to return our	
FLORIDA SECRETARY OF STATE  Corporations Division  P.O. Box 6327	AUTHROIZE REQUESTOR	

Tallahassee, FL 32314

GALE SMITH-CAMP

## STATEMENT OF CHANGE OF REGISTERED AGENT AND/OR REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION AND FOREIGN CORPORATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION OR FOREIGN CORPORATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO CHANGE ITS REGISTERED OFFICE AND/OR REGISTERED AGENT:

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(FEI Number, if applicable)	
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FILING FEE: \$35.00 DIVISION OF CORPORATIONS- P. O. BOX 6327-TALLAHASSEE, FL 32314