## 2004 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F03000002276

Entity Name: LEAF FUNDING, INC.

Address:

City-St-Zip:

FILED Dec 10, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 110 S. POPLAR ST., STE. 101 WILMINGTON, DE 19801 **Current Mailing Address: New Mailing Address:** 1845 WALNUT ST., 10TH FLOOR PHILADELPHIA, PA 19103 FEI Number: 57-1159764 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MUNROE, W. BRADLEY ESQ 239 E. VIRGINIA ST. TALLAHASSEE, FL 32301 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition DEMENT, CRIL S Name: Name: 1845 WALNUT ST., 10TH FLOOR Address: Address: City-St-Zip: PHILADELPHIA, PA 19103 City-St-Zip: ( ) Delete Title: VCP Title: () Change () Addition Name: HERMAN MILES Name: 1845 WALNUT ST., 10TH FLOOR Address: Address: PHILADELPHIA, PA 19103 City-St-Zip: City-St-Zip: Title: Title: () Delete ( ) Change (X) Addition Name: MOSKOVITZ, ROBERT K Name: 1845 WALNUT ST., 10TH FLOOR Address Address: City-St-Zip: City-St-Zip: PHILADELPHIA, PA 19103 Title: () Delete Title: ( ) Change (X) Addition ENGLISH, DAVID Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

1845 WALNUT ST., 10TH FLOOR

PHILADELPHIA, PA 19103

SIGNATURE: ROBERT K. MOSKOVITZ V 12/10/2004