L05000032836

| (Requ | estor's Name) | |
|-----------------------------|-----------------|--------------|
| | | |
| (Addre | ess) | |
| | | |
| (Addre | ess) | |
| (City/S | State/Zip/Phone | <u>a #1)</u> |
| Collyn | Jaco Zipii iion | O 117) |
| PICK-UP | ☐ WAIT | MAIL |
| | | |
| (Busir | ness Entity Nar | me) |
| | | |
| (Docu | ment Number) | |
| | | |
| Certified Copies | Certificates | s of Status |
| | , | |
| Special Instructions to Fil | ing Officer: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



900062741709

00/09/08---01059--001 **25.00

SECRETARY OF STAIL OIVISION OF CORPORATION



COVER LETTER

| TO: Registration Section Division of Corporations | | |
|--|---|--|
| SUBJECT: ChriStian Deb | ed Liability Company) | |
| Dear Sir or Madam: | | |
| The enclosed Registered Agent/Registered Office | Change and fee(s) are submitted for filing. | |
| Please return all correspondence concerning this n | natter to the following: | |
| Charles McCannell (Name of Person) | | |
| Christian Debt Consol | 1 de ters | |
| 505 NG DUL AVE | 2005 JAN - 9 PH 5: 0 | |
| Deerfield Blach, FC (City/State and Zip Code) | 33441 Si 25/24/24 | |
| For further information concerning this matter, ple | ease call: | |
| (Name of Person) at (| (Area Code & Daytime Telephone Number) | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | |
| Enclosed is a check for the following amo | ount: | |
| \$25 Filing Fee | \$55 Filing Fee & Certified Copy | |

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

| 1. The name of the limited liability company is: ChriStign Debt Co | on Sollda |
|---|---|
| 2. The mailing address of the limited liability company is: 201 SE 15th Terre DeerField Reach, FL 33441 | ke Ste |
| 1/04/05 3. Date of filing/registration in Florida LOS0006 30 8 36 4. Document number | · |
| 5. The name of the registered agent and the registered office address as shown on the record Florida Department of State: \[\text{\text{VVVation}} \ \text{\text{SVV(Q)}} \ \text{\text{Company}} \] \[\text{\text{\text{Jol HayS}} \ \text{\text{SI}} \] \[\text{\text{Address}} \ \text{\text{\text{Tallahassel}}, \text{\text{\text{EL}} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | s of the 2005 JAN - |
| 6. The name and address of the new registered agent and/or office: Charles McCunnell Sos NE York Ave Ste 17 Florida street address (P.O. Box NOT acceptable) Delries Lock FL 33441 City, State and Zip | Y OF STATE CORPORATIONS 9 PM 5: 04 |
| If the limited liability company is not organized under the laws of the State of Florida, it is a confirmed that after the change or changes are made, the Florida street address of the register and the business office of the registered agent will be identical. Or, in the case of a Florida liability company, it is hereby confirmed that the change(s) was/were authorized by an affirm of the members of the limited liability company or as otherwise provided in the articles of or the operating agreement of the limited hability company. (Signature of a member or authorized representative of a member) | nereby ered office limited mative vote organization |

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 obligations of my position as registered agent as provided for in Chapter 608, F,S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

(Printed or typed name of signee)

i in