L04000014895

(Requestor's Name) (Address)	900031594		
(Address)	300031034		
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)	0/211/04 ± 010/0		
(Document Number)	02/11/04: -01070		
Certified Copies Certificates of Status	ALLAI		
Special Instructions to Filing Officer:			
needstoday	FLORIDA		
if Passobie	M		
	1/ //		

Office Use Only



169

**43,75 ~ U(E)

---**11.25

04 MAY 11 PH 2:37

CORPORATE					
ACCESS,	236 Enst 6	dh Avenue . Tallahassee,	Florida 3230.	3	
NC. P.O. B	ox 37066 (32315-706	6) ~ (850) 222-2666	or (800) 969-	1666 . Fax (850) 222-	1666
CERTIFIED COPY	PICK UP	ALK IN SILLOY LC CUS	nd a	WHAN I PA C	
РНОТО СОРУ		VHLING_	RA C	hong e	
1.) AHATIC BOOCUMENT #)	each C	dections,	Too	. LLC	
(CORPORATE NAME & DOCUMENT #)					
3.) (CORPORATE NAME & DOCUMENT #)					· · · · · · · · · · · · · · · · ·
4.)(CORPORATE NAME & DOCUMENT #)				· _ · · · · · · · · · · · · · · · · · ·	·
(CORPORATE NAME & DOCUMENT #)					
SPECIAL INSTRUCTIONS					

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.

agent, or both, in the State of Florida.
1. The name of the limited liability company is: Atlantic Beach Collections Le.
2. The mailing address of the limited liability company is: 1260 N. Atlantic Avenue
Daytona Beach, FL 32118
Feb. 25, 2004 LOY DOOD 14895
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Kathryn A. Vaughan Name Registered office address as shown on the records of the Florida Department of State:
110E. branada Blud. Ste 104 Address
Or mond Beach FL 3alou City, State and Zip 6. The name and address of the new registered agent and/or office:
6. The name and address of the new registered agent and/or office:
Reinman. Matheson. Vaughan + Durham, P.A. Name 110 E. Granada Blud. Ste 104 Florida street address (P.O. Box NOT acceptable)
Ormand Beach, FL 32171. City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
(Signature of a pember or authorized representative of a member)
GEORGE J. ROBINSON
(Printed or typed name of signee)
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.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

Reinman, Matheson, Vaughan & Durham (Signature of Registered Agent)