F01000004010

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S. YOUNG

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Atlantic Credit and Finance, Inc. Name of Corporation	
DOCUMENT NUMBER: F01000004010	
The enclosed Statement of Change of Registered Offi	ce/Agent and fee are submitted for filing.
Please return all correspondence concerning this matt	er to the following:
Giovanna Luevano	
Name of Contact Person	
Midland Credit Management, Inc.	
Firm/Company	
350 Camino de la Reina, Suite 100	
Address	
San Diego, CA 92108	
City/State and Zip Code	
licensing@mcmeg.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please	e call:
Giovanna Luevano	at (858) 309-9312 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number

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 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation	17,0502, 607,1508, or 617,1508, Florida State corganized under the laws of the State of <mark>Virg</mark> registered agent, or both, in the State of Flore	ginia		
1. The name of t	he corporation: Atlantic Credit and	l Finance, Inc.			
		E. Suite 400. Roanoke, VA 24011			
3. The mailing a	ddress (if different): 350 Camino d	de la Reina, Suite 100, San Diego, CA 92108			
		Document number: F010000040	10		
5. The name and		tered agent and registered office on file with t			
	Corporation Service Company				
	1201 Hays Street		; •	282	
	Tallahassee, FL 32301		7. 7. 164	3 OC 1	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered offi			2023 OCT 30 PM	
	Midland Credit Management, Inc.		-	ف پ	
	13008 Telecom Drive, Suite 350			6: 26	
	P.O. Box. NOT acceptable Tampa, FL. 33637				
The street addreas changed will		street address of the business office of its re	gistered	agent,	
Such change was authorized by the	s authorized by resolution duly a ne board, or the corporation has be	dopted by its board of directors or by an officen notified in writing of the change.	icer so		
Signature of an officer or director		Amy Sacks - Assistant Secretary Printed or typed name and title			
I further agree of of my duties, an document is bei	the appointment as registered ag to comply with the provisions of a d I am familiar with and accept to ng filed merely to reflect a chang been notified in writing of this co	ent and agree to act in this capacity, all statutes relative to the proper and comple he obligation of my position as registered ag e in the registered office address, I hereby c hange.	te perfoi zent. Or onfirm ti	rmance if this hat the	
your Sante		10/12/2020			
Sig	nature of Registered Agent	Date			
If signing on be	half of an entity:				
Amy Sacks					
T	ped or Printed Name	•			

* * * FILING FEE: \$35.00 * * *

FL ACF Statement of Change of Registered Agent - Draft

Final Audit Report

2020-10-28

Created:

2020-10-28

By:

Giovanna Luevano (Giovanna.Luevano@mcmcg.com)

Status:

Signed

Transaction ID:

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"FL ACF Statement of Change of Registered Agent - Draft" History

- Document created by Giovanna Luevano (Giovanna.Luevano@mcmcg.com) 2020-10-28 11:29:37 PM GMT- IP address: 192.112.148.4
- Document emailed to Amy Sacks (amy.sacks@mcmcg.com) for signature 2020-10-28 11:29:57 PM GMT
- Email viewed by Amy Sacks (amy.sacks@mcmcg.com) 2020-10-28 11:30:25 PM GMT- IP address: 192.112.148.4
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 Signature Date: 2020-10-28 11:30:31 PM GMT Time Source: server- IP address: 192.112.148.4
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