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	equestor's Name)		
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(Ad	idress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
☐ PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to	Filing Officer:	•	

Office Use Only



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SECRETARY OF STAT

ADR 9/3/03

CT CORPORATION

September 2, 2003

Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re: Order #: 5910949 SO

Customer Reference 1: Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Nelnet Loan Services, Inc. (NE) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Brigham Weir Fulfillment Specialist Brigham_Weir@cch-lis.com

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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

	ne provisions of sections 607. Ed corporation organized unde		508, or 617.1508, Florida Statutes of Nebraska	i,
submits the foi the State of Flo	_	change its registered oj	ffice or registered agent, or both, is	n
1. The name o	f the corporation : Nelnet Loan !	Services, Inc.		
2. The mailing	address of the corporation: 6	420 Southpoint Parkway, Ja	acksonville, FL 32216	_
3 Date of ince	orporation/qualification: 4/4/20	002 Doc	sument number: F02000001865	
			E T	-
4. The name a	nd address of the current regis	tered agent and office:	ASSI ASSI	I
	Edward P. Martinez			*****
	6420 Southpoint Pkwy.		71.0	. بې
	Jacksonville, FL 32216		87	ن به
5. The name ar	nd address of the new registere	ed agent (if changed) an Box Not Acceptable)	nd/or registered office (if changed):	'
	C T Corporation System			
	c/o C T Corporation System, 1200	South Pine Island Road,		
	Plantation, Florida 33324			
The street addagent, as chan	ress of its registered office an ged, will be identical.	d the street address of	the business office of its registered	
Such change vauthorized by	vas authorized by resolution of the board.	luly adopted by its boar	rd of directors or by an officer so	
	Ed Hallen		8-20-03	
(Signature	e of an officef, chairman or vice chairm	an of the board)	(Date)	
d Martine	22 Secretary 1 (Printed or typed name and title)	-	
i juriner agree performance o registered age	e to comply with the provision of my duties, and I am familia nt.	is ot au statutes relativ	rocess for the above stated and agree to act in this capacity. e to the proper and complete bligation of my position as	
CT Corporation			8-26-03	
	(Signature of Registered Agent)		8-26-03 (Date)	
If signing on beha	· •			
Hiedi M. Liesch	-	As	sst. Secretary	
	(Typed or Printed Name)		(Capacity)	

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