F0500001023

Premier Conporate Services (Requestor's Name)		
(Requestor's Name)		
200 West Alams St., Stc 2007 (Address)		
Chicago IL 60606		
, (Addless)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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SECRETARY OF STATE

Malian

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

1

statement of change is:	tions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida State of submitted for a corporation organized under the laws of the State of $\frac{P}{P}$	² A	
in order to ch	hange its registered office or registered agent, or both, in the State of Flo	orida.	
	rporation: PD Recovery, Inc.		
2. The principal office	address: 1436 Lancaster Avenue, #210		
Berwyn, Pennsy	ylvania 19312		
3. The mailing address	s (if different):		
4. Date of incorporation	on/qualification: 02/15/2005 Document number: F05000)001023	
	t address of the current registered agent and registered office on file with		
CT	Corporation System	<u>.</u>	
1200	00 South Pine Island Road	SEC SEC	
Plar	ntation, FL 33324	RETA AFAS	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
NRA	RAI Services, Inc.		
273	31 Executive Park Drive, Suite 4		
	(P.O. Box NOT acceptable)	•	
_We	eston, FL 33331	-	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.			
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.			
	Roy Hibberd, Secretary (Printed or typed name and to	ītle)	
I hereby accept the ap I further agree to com of my duties, and I am document is being file corporation has been	ppointment as registered agent and agree to act in this capacity, inply with the provisions of all statutes relative to the proper and com familiar with and accept the obligation of my position as registered ed merely to reflect a change in the registered office address, I hereby a notified in writing of this change.	plete performance I agent. Or, if this ly confirm that the	
National Registere			
(Signature 6	of Registered Agent) (Date)		
If signing on behalf of	of an entity:		
	ssistant Secretary		
(Typed or	r Printed Name)		

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