## FC5000004371

(Requ	uestor's Name)	,,				
(Addı	ress)					
(Addi	ress)					
(City/	State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	MAIL				
(Busi	ness Entity Na	me)				
(Document Number)						
Certified Copies	Certificate	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



100265208571

10/16/14--01032--004 \*\*35.00

14 OCT 16 PM 4:39

Ra change



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: October 14, 2014

Order#: 335394-003

Re: MALIBU FUNDING, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Morgan Kennedy c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	provisions of sections 607.050 nge is submitted for a corport r to change its registered offic	ation organiz	ed under the la	ws of the State of <u>(</u>	CA	<del></del>	
1. The name of t	he corporation: MALIBU FUN	IDING, INC.		_			
	office address: DRIVE, MALIBU, CA 90265						
3. The mailing a	ddress (if different):						
4. Date of incorp	ooration/qualification: 07/27/	2005	Document	number: <u>F050000</u>	04371	-	
	street address of the current timent of State: (If resigned, e	-	_	ed office on file wi	th the		
	PARACORP INCORPORAT	ΓED					
	236 EAST 6TH AVE.						
	TALLAHASSEE		FL	32303			
6. The name and (if changed):	street address of the new reg	istered agent	(if changed) an	d /or registered off	īce		
	Corporation Service Compa	ny					
	1201 Hays Street						
		P.O. Box NOT a	-				
	Tallahassee		FL	32301		17	
	ess of its registered office and be identical.					aggen:	t, 📑
Such change wa authorized by th	s authorized by resolution due board, or the corporation h	uly adopted b as been noti	y its board of c fied in writing o	lirectors or by an of the change.	officer so	6 PH	
	26	•	Dona Priebe, V	ice President	*** ·		i
	re of an officer or director			ed or typed name and title	e 1	ယ	
I further agree to performance of agent. Or, if this hereby confirm	the appointment as registere o comply with the provisions my duties, and I am familiar is document is being filed me that the corporation has been Service Company	s of all statut with and acc	es relative to th cept the obligat	e proper and com ion of mv position	as register	ed	
•	nature of Registered Agent		10/14/2014				
	nature of Registered Agent half of an entity:			Date			
	Asst. Vice President						
·	yped or Printed Name						

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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