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() Nonprofit () Foreign () Limited Partnership	() Dissolution/Withdrawal () Reinstatement () Annual Report	() Mark
() Nonprofit () Foreign () Limited Partnership	() Dissolution/Withdrawal () Reinstatement	() Mark 5
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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

	the provisions of sections 607.0502, 617.0502, 607.1508 ned corporation organized under the laws of the State of Γ		itutes,		
submits the fo	collowing statement in order to change its registered office		oth, in		
the State of Florida. 1. The name of the corporation: Universal Commercial Credit Leasing, Inc.					
2. The mailing	ng address of the corporation: 14651 Dallas Parkway, Ste. 500,	Dallas TX 75240		- -	
3. Date of inc	corporation/qualification: December 31, 1997 Docum	ent number: <u>F97000006934</u>		_	
4. The name a	and address of the current registered agent and office:				
	Corporation Service Company				
	1201 Hays Street	Z	02		
	Tallahassee FL 32301		: 55	-73	
5. The name a	and address of the new registered agent (if changed) and/o (P. O. Box Not Acceptable)	r registered office (if change	ed)်ပ	:ILED	
	C T Corporation System		P	Ū	
	c/o C T Corporation System, 1200 South Pine Island Road,				
	Plantation, Florida 33324		·· æ		
	ldress of its registered office and the street address of the inged, will be identical.				
Such change authorized by	was authorized by resolution duly adopted by its board of the board.	of directors or by an officer	'so		
(Signatu	ure of an officer, chairman or vice chairman of the board)	September 4, 2002 (Date)	-		
Γerri Atteberry, \	Vice President (Printed or typed name and title)				
Having been corporation, I further agre performance registered ag	named as registered agent and to accept service of proc I hereby accept the appointment as registered agent and ee to comply with the provisions of all statutes relative to of my duties, and I am familiar with and accept the obli- gent.	gation of my position as	ity.		
By:	Mana Parta 9-4 (Signature of Registered Agent)	1-02- (Date)	_		
If signing on hel	ehalf of an entity:	\ /			
Maria Ozaeta	•	resident	_		
(Typed or Printed Name) (Capacity) * * * FILING FFE: \$35.00 * * *					

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314

FL006 - 09/17/01 C T System Online