F98000005407

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



400360279994

03/05/21--01028--013 **35.00

72/1588-5 PH 5:43

O SIMME ...



CSC - WILMINGTON
251 Little Falls Drive
Wilmington , De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: March 3, 2021

Order#: 610139-341

Re: REGIONAL ACCEPTANCE CORPORATION

Enclosed please find:

XX Change of Registered Agent and Office.

XX. Check in the amount of \$35.

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: Ami Casper

c/o Corporation Service Company

251 Little Falls Drive 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.

OUCA.XCOA

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

statement of ch	ange is submitted for a corporation org	1502, 607,1508, or 617,1508, Florida Statutes, ganized under the laws of the State of <u>North C</u> gistered agent, or both, in the State of Florida.	
1. The name of	the corporation: REGIONAL ACCEP	TANCE CORPORATION	
2. The principal	l office address: 1424 East Fire Tower	Road, Greenville, NC 27858	
3. The mailing a	address (if different): c/o Katrina D. Ran	ney, 200 West Second Street, 3rd Floor, Winston-	Salem, NC 27101
4. Date of incor	poration/qualification: 09/28/1998	Document number: F98000005407	
	d street address of the current registere artment of State: (If resigned, enter resigned)	d agent and registered office on file with the gned)	
	C T Corporation System		
	1200 South Pine Island Road		227 WH -5
	Plantation	FL 33324	19
6. The name and (if changed);		gent (if changed) and /or registered office	-5 PH 5:
	Corporation Service Company		:
	1201 Hays Street		
		Box NOT acceptable	
	Tallahassee	FL 32301	
The street address changed will	ess of its registered office and the stre l be identical.	eet address of the business office of its registe	red agent,
Such change wa authorized by the	as authorized by resolution duly adop he board, or the corporation has been	ted by its board of directors or by an officer s notified in writing of the change.	Ю
Xi	e E agnie	Jill Cilmi, Vice President	
/ "	are of an officer or director	Printed or typed name and title	
l furthe r ag rée of my duties, ar document is bei corporation has	the appointment as registered agent to comply with the provisions of all st nd I am familiar with and accept the o ing filed merely to reflect a change in s been notified in writing of this chang n Service Company	tatutes relative to the proper and complete pe obligation of my position as registered agent. The registered office address, I hereby confir.	rformance Or, if this m that the
ву:	um lei	01/18/2021	
Sig	nature of Registered Agent	Date	
If signing on be	chalf of an entity:		
Ami M. Casper,	Asst. Vice President		
T	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)

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