

Florida Department of State

Division of Corporations Public Access System

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Tu:

Division of Corporations

Fax Number

: (850)205-0380

: GUNSTER, YOAKLEY, ETAL. (MIAMI OFFICE) Account Name

Account Number : 076077002561

: (305)376-6023 Phone : (305)376-6010 Fax Number

REGISTERED AGENT CHANGE

S/T FUNDING COMPANY, LLC

Certificate of Status	0
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Corporate Filings

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FAX AUDIT NO. H 0300287409

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions liability company submits tagent, or both, in the State	he following statement in c	18.508, Florida Statutes order to change its regi	, the undersigned limited stered office or registered	
1. The name of the limited	liability company is: 8/T	FUNDING COMPANY, LLC	<u> </u>	
	he limited liability company			
Florida, 33312				
45 0000		101000007719		
May 15, 2001	of filing/registration in Florida 4. Document number		nher	
5. Date of imaging squade	gi ;;; i iOilda	. Doodson Mar	,	
5. The name of the registers Florida Department of St	ed agent and the registered of late:	ffice address as shown o		
_	KE&F Registered	Agent Curp.	. As 3	
	Name	•	S S	
_	2601 South Bayshore	Drive, Suite 600		
	Addre	SS	30 PH	
	Miami, Flori			
	Cily, State	ind Zip		
6. The name and address of	the new registered agent an	d/or office:	PH 1-27 STE FLORID	
_	Valdes-Fauli Corporat	e Services, Inc.		
·	Name	_		
_	2 South Biscayne Bl	vd., Ste 3400		
Florida street address (P.O. Box NOT acceptable)				
_	Miami FL	33131		
	City, State an	d Zip		
confirmed that after the cha and the business office of the liability company, it is here the members of the limited	any is not organized under tange or changes are made, the registered agent will be id by confirmed that the chang liability company or as other limited liability company of the liability compan	e Florida street address a lentical. Or, in the case e(s) was/were authorized awise provided in the ar	of the registered office of a Florida limited d by an affirmative vote of	
Gerard M. Cohen				
(Printed or typed name of signee)				
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 008, F.S. Or, if the address of hereby confirm to the confirmation	iment as registered agent on of all statutes relative to the accept the obligations of my is document is being filed to hat the limited liability complete. Lhur J. Furia, Vice Pr		pacity. I further agree to orformance of my duties, igent as provided for in in the registered office i writing of this change.	
	of Corporations P.O. Box		. 32314	

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