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Buchanan Ingersoll

ATTORNEYS'

Cynthia J. Sargent Legal Assistant 813 222 8182 sargentcj@bipc.com SunTrust Financial Centre 401 E. Jackson Street, Suite 2500 Tampa, FL 33602-5236

T 813 222 8180 F 813 222 8189 www.buchananingersoll.com

July 26, 2005

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Re: People's Credit First, LLC
Document No. L01000008723

Dear Sir/Madam:

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Cynthia J. Sargent Buchanan Ingersoll PC 401 E. Jackson Street Suite 2500 Tampa, Florida 33602

For further information concerning this matter, please call me at (813) 222-8182.

Enclosed is a \$35.00 check made payable to the Department of State.

Very truly yours,

Cynthia J. Sargent

CJS/

Enclosure(s), The content were content in the figure and the content in the conte

#88375-v1;TAMI_GENERAL;SARGENT1

Pennsylvanja :: New York :: Washington, DC :: Florida :: New Jersey :: Delaware :: California :: London :: Dublin

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

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limite	ed liability company is:	People's Credit First, LLC	·
2. The mailing address of	f the limited liability co	ompany is: 4620 N. Hale Av	/enue
Tampa, Florida 33614			
May 31, 2001		L0100008723	
3. Date of filing/registrat	ion in Florida	4. Document nu	mber
5. The name of the register Florida Department of		stered office address as shown	on the records of the
	400 North Tampa S	Name Street, Suite 2300	e
	Tampa, Florida 33	Address 602 State and Zip	司是
6. The name and address	•	•	29
	Mark J. Bernet as Receiver for People's Credi Name 401 E. Jackson Street, Suite 2500		
	401 E. Jackson Str	Name eet, Suite 2500	
	Florida street address	s (P.O. Box NOT acceptable)	
	Tampa,	FL 33602	
	City, S	State and Zip	
confirmed that after the chand the business office of liability company, it is her the members of the limite the operating agreement of the limite the operations of the limite the li	nange or changes are me the registered agent with the confirmed that the deliability company or a		Florida, it is hereby of the registered office of a Florida limited d by an affirmative vote of ticles of organization or
Mark J. Bernet			
(Printed or typed name of signee)			•
Market	intment as registered as sof all statutes relative date accept the obligation his document is being that the limited liability	gent and agree to act in this co e to the proper and complete p s of my position as registered filed to merely reflect a change ty company has been notified i	spacity. I further agree to erformance of my duties, agent as provided for in e in the registered office n writing of this change.
(Signature of Registered Agent)	n of Cornorations P	O. Box 6327. Tallahassee. FI	. 32314

FILING FEE: \$25.00

INHS18(10/99)