

602 000017793

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

602-17793
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FAX 212.267.2030

Solomon Pearl Blum Heymann & Stich LLP
Attorneys and Counselors-At-Law

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New York, NY 10005
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www.solpearl.com

September 10, 2004

Department of Corporations
State of Florida
P.O. Box 6327
Tallahassee, Florida 32314

To Whom It May Concern:

Please find enclosed herewith the original and one copy of the Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company, on behalf of the Florida company we represent, First Credit Mortgage Fund, LLC. Also enclosed is our attorney's check in the amount of \$25 for the filing of this document.

Kindly return a date stamped copy of this Statement of Change in the self-addressed stamped envelope enclosed herein.

Very truly yours,


Jill H. Teitel

Encl.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

New York
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Denver
U.S. Virgin Islands

**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 limited liability company is: First Credit Mortgage Fund, LLC
2. The mailing address of the limited liability company is: 1503 West Smith Street, Orlando
Florida 32804

July 15, 2002

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3. Date of filing/registration in Florida
4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

A.G.C. Co. by Kenneth C. Wright

Name

200 South Orange Avenue, Suite 2300

Address

Orlando, Florida 32801

City, State and Zip

6. The name and address of the new registered agent and/or office:

Gary Lind Johnson

Name

1503 West Smith Street

Florida street address (P.O. Box NOT acceptable)

Orlando

FL 32804

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

Gary Lind Johnson

(Printed or typed name of signer)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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