

L04000046909

(Requestor's Name)

701 W. Cypress Creek Rd.

(Address)

Ste # 301

(Address)

Ft. Lauderdale, FL 33309

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

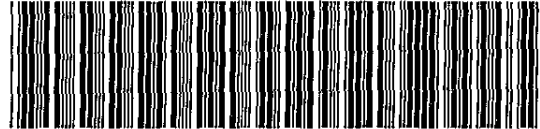
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WL 05/26/05  
FILED  
05 MAY 19 AM 10:58  
STATE OF FLORIDA  
TALLAHASSEE

**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: Ark Lending Group, LLC
2. The mailing address of the limited liability company is : 701 West Cypress Creek Rd. Suite # 301, Ft. Lauderdale, FL 33309
3. Date of filing/registration in Florida 6/23/04 4. Document number L04000046909

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Peter Tocci  
Name  
701 West Cypress Creek Rd. # 301  
Address  
Ft. Lauderdale, FL 33309  
City, State and Zip

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

Jeremy Buccio  
Name  
4401 West Tradewinds Ave. STE 201  
Florida street address (P.O. Box NOT acceptable)  
Lauderdale-by-the-sea FL 33308  
City, State and Zip

**FILED**  
05 MAY 19 AM 10:59  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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.

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

PETER TOCCI  
(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.*

Jeremy Buccio  
(Signature of Registered Agent)

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