2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000089253

City-St-Zip:

Entity Name: CHARTER FUNDING OF NAPLES, LLC

FILED Oct 07, 2008 Secretary of State

Current P	New Prin	New Principal Place of Business:			
2059 TRAI NAPLES, I	DE CENTER WAY FL 34109				
Current Mailing Address:		New Mail	New Mailing Address:		
2059 TRAI NAPLES, I	DE CENTER WAY FL 34109				
FEI Number: FEI Number Applied For () F In accordance with s. 607.193(2)(b), F.S., the limited liability compar			FEI Number Not Applicable (X) Certificate of Status Desired (X) ny did not receive the prior notice.		
Name and	Address of Current Registered Ager	nt: Name an	d Addres	s of New Registered Agent:	
	., LAUREN DE CENTER WAY FL 34109 US				
	named entity submits this statement for e of Florida.	the purpose of changing	its registe	ered office or registered agent, or both	
SIGNATU	RE: LAUREN MAXWELL				
	Electronic Signature of Registere	d Agent		Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS	ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGR () Delete MAXWELL, LAUREN 2059 TRADE CENTER WAY NAPLES, FL 34109	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address:	() Delete	Title: Name: Address:		() Change (X) Addition N, JERALD ADE CENTER WAY	

City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LAUREN MAXWELL PRES 10/07/2008