L07000099183

Registered Agent Solution (Requestor's Name) 515 Congress Ave (Address) Ste 2300 (Address)	500179923765
City/State/Zip/Phone #) PICK-UP WAIT MAIL	05/04/1001043019 **325.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 10 MAY -4 AM 10: 29 SECRETARY OF STATE TALLAHASSEE, FLORID
Special instructions to Filing Officer.	

Office Use Only

✓ 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
Pursuant to the provisions of sections 608.416 or 608 liability company submits the following statement in or agent, or both, in the State of Florida.	der to change its registered office or registered
1. Name of the limited liability company:CF_AC	CQUISITION COMPANY M/T, LLC
2. (a) Principal office address of limited liability compa	ny:
(<u>Note: MUST BE STREET ADDRESS</u>)	8775 FOLSOM BLVD, SUITE 200 SACRAMENTO CA 95826,
(b) Mailing address of limited liability company:	HATE TO THE PERSON OF THE PERS
(Note: MAY BE POST OFFICE BOX)	same as above
09/28/2007	L07000099189公 5
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:
Registered Agent:	PEEK, SCOTT
Registered Office Address:	1705 N 16TH STREET TAMPA FL 33605 US
(b) Enter name of NEW Registered Agent and/or N	EW Registered Office address:
NEW Registered Agent:	REGISTERED AGENT SOLUTIONS, INC.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 OFFICE PLAZA DRIVE SUITE A
MUST BE TECKIDA STREET ADDRESS	TALLAHASSEE ,FL32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote perwise provided in the articles of organization
Signature of a member or authorized representative of a member	
CARL A. PANATTONI	
Printed or typed name of signee	
Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability compositions of the composition of the c	l agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.
· · · · · · · · · · · · · · · · · · ·	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00