

2011 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L09000024944

FILED
Jan 12, 2011
Secretary of State

Entity Name: FLORIDA RECOVERY CREDIT SERVICES L.L.C.

Current Principal Place of Business:

4651 SALISBURY RD
SUITE 440
JACKSONVILLE, FL 32256

New Principal Place of Business:

2974 HARTLEY RD
SUITE 3
JACKSONVILLE, FL 32257

Current Mailing Address:

4651 SALISBURY RD
SUITE 440
JACKSONVILLE, FL 32256

New Mailing Address:

PO BOX 600920
JACKSONVILLE, FL 32260

FEI Number: 80-0371075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHAEFFER, STEVEN E
1401 RIVERPLACE BLVD
#2205
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

SCHAEFFER, STEVEN E
2974 HARTLEY RD
SUITE 3
JACKSONVILLE, FL 32257 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ERIC SCHAEFFER

01/12/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES
Name: SCHAEFFER, STEVEN E
Address: 2974 HARTLEY RD SUITE 3
City-St-Zip: JACKSONVILLE, FL 32257

I hereby 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: ERIC SCHAEFFER

PRES

01/12/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date