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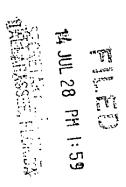
(Requestor's Name)
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AUG 0 7 2014

C. CARROTHERS

COVER LETTER

TO: Registration Section

INHS18 (2/14)

Division of Corporations					
Catalyst Collection Solutions LL	Catalyst Collection Solutions LLC				
	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office C	hange and fee(s) are submitted for filing.				
Please return all correspondence concerning this ma	tter to the following:				
Aaron Diller					
Name of Person					
Catalyst Collection Solutions LLC					
Firm/Company					
5899 Whitfield Ave Suite# 201					
Address					
Sarasota, FL 34243					
City/State and Zip Code					
ADiller@ChooseCatalyst.com					
E-mail address: (to be used for future annual re	eport notification)				
For further information concerning this matter, pleas	se call:				
Aaron Diller at	941 782-1206				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section				
Division of Corporations	Division of Corporations				
Clifton Building	P.O. Box 6327				
2661 Executive Center Circle	Tallahassee, Florida 32314				
Tallahassee, Florida 32301					
Enclosed is a check for the following amount:					
≥ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. Na	ame of the limited liability company: Catalyst Colle	ection Soluti	ons LLC	
2. (a)	5899 Whitfield Ave Suite #201	(b) PO Box 110674		
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Sarasota, FL 34243	Lał	kewood Ranch, FL 34211	
	2/11/13	L130	000021796	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Aaron T Diller			
(,	Registered Agent and Registered Office shown on the records of 6150 STATE ROAD 70 EAST	the Florida Dept.	of State:	
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)		
	Bradenton , FL	34203		
(b)	Aaron T Diller		10 m	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		P	
	5899 Whitfield Ave Suite #201		-: 59	
	NEW Registered Office Address:			
	Sarasota , FL	34243		
the cha agent v was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registered ability compar of the limited l	d office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ty company.	
Signa	ature of a member or authorized representative of a member		Printed or typed name of signee	
I here provis the obt to mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I de in writing of this change.	ree to act in th performance d for in Chapt hereby confire	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed n that the limited liability company has been	
Signatu	ire of Registered Agent			