

M000000002425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

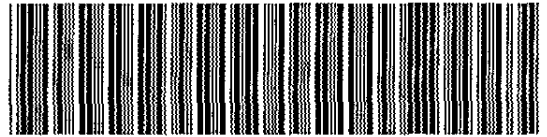
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

2/4 name change

M.O. - 2425

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02/04/03--01076--008 **25.00

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03 FEB - 4 PM 12:44
STATE
DIVISION
FALCON

FILED
03 FEB - 4 PM 1:42
STATE
DIVISION
FALCON

CT CORPORATION

February 4, 2003

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

Re: Order #: 5779410 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

HPSC Gloucester Funding 2003-I LLC II (DE)
Evidence of Amendment
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Melanie S Strickland
Fulfillment Specialist
Melanie_Strickland@cch-lis.com

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615


**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO
FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

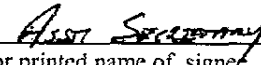
1. Name of limited liability company as it appears on the records of the Florida Department of State: HPSC GLOUCESTER FUNDING 2002-1 LLC II
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: 11/29/2000

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? _____
5. New name of the limited liability company: _____
HPSC GLOUCESTER FUNDING 2003-1 LLC II
6. If the amendment changes the period of duration, indicate new period of duration: _____
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: _____
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: _____
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of a member or the authorized
representative of a member

Richard L Kenney 

Typed or printed name of signee

03 FEB -4 PM 1:42

FILED

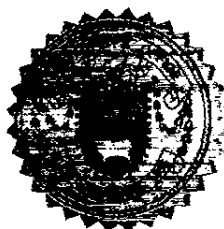
Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "HPSC GLOUCESTER FUNDING 2002-1 LLC II", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "HPSC GLOUCESTER FUNDING 2003-1 LLC II", THE TWENTY-FIRST DAY OF JANUARY, A.D. 2003, AT 4 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



3296549 8320

030065425

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2235472

DATE: 01-31-03