M01000000018

Requester's	Name		
COMMERC	E GROUP	_ 20	0007773992js -09/16/0201075002 ******25.00 *****
1280 West Newpo Deerfield Beach		Office	Use Only
COR.	IT NU	JMBER(S), (if know	vn):
1. (Corporation I	Name)	(Document #)	
2(Corporation 1	vame)	(Document #)	
3. (Corporation 1	Name)	(Document #)	02 SEP 1 SECRETA
	ck up time Till wait		Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Availability Other	AMEN AI Re CI Di	NDMENTS mendment esignation of R.A., On nange of Registered A issolution/Withdrawa erger	fficer/Director Agent
Document OTHER FILINGS Examiner Updater Annual Report Fictitious Name Updater Verifyer Acknowledgement DCC	☐ Fo☐ Li☐ Re	oreign mited Partnership einstatement ademark ther	IFICATION .
W. P. Verifyer DCC CR2E031(7/97)		E	xaminer's Initials

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 liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limite	ed liability company is: NCA FUNDING LLC	•
2. The mailing address of	f the limited liability company is: 1280 WEST NEWS	ORT CENTER DRIVE .
DEERFIELD BEACH, F	L 33442	
		•
MARCH 21, 2001	- M01000000618	
3. Date of filing/registrat.	ion in Florida 4. Document nun	aber
5. The name of the registe Florida Department of	ered agent and the registered office address as shown of State:	on the records of the
	Corporation Service Company	
	Name	
	1201 Hays Street	
	Address	
	Tallahassee, FL 32301-2525	
	City, State and Zip	P (0, C)
6. The name and address	of the new registered agent and/or office:	02 S SECI
	Sheila L. O'Boyle	SEP CRET/ LAHA
		ARY SSI
	Name 23 North Hidden Harbour Drive	FILED 16 PM ARY OF SSEE, F
	Florida street address (P.O. Box NOT acceptable)	F S: 2
	Gulf Stream, FL 33483	2: 01 STATI FLORIU
	City, State and Zip	A
confirmed that after the cland the business office of liability company, it is her the members of the limite the operating agreement o	apany is not organized under the laws of the State of Finange or changes are made, the Florida street address the registered agent will be identical. Or, in the case reby confirmed that the change(s) was/were authorized d liability company or as otherwise provided in the art of the limited liability company.	lorida, it is hereby of the registered office of a Florida limited I by an affirmative vote of ticles of organization or
(Signature of a momber or authori	ized representative of a member)	
Martin E. O'Boyle		
(Printed or typed name of signee)	-	•
I hereby accept the appoint comply with the provision and I am familiar with an Chapter 608, F.S. Or, if the address, I hereby confirm (Signature of Registered Agent)	intment as registered agent and agree to act in this ca s of all statutes relative to the proper and complete pe d accept the obligations of my position as registered a his document is being filed to merely reflect a change that the limited liability company has been notified in	pacity. I further agree to reformance of my auties, igent as provided for in in the registered office i writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

FILING FEE: \$25.00