M01000001423

MAIL
_
Status
<u></u>
 1
į
.
1114 1
18115

Office Use Only



600023194856

10/31/03--01071--002 **25.00

0300T31 MH0:39

PARANET CORPORATION SERVICES, INC.

3761 Venture Drive, Suite 260 Duluth, Georgia 30096 770-497-9977 / 800-277-9977 Fax 770-813-0477 / fax 800-815-0477 E-Mail: Maggie@Paranetlegal.com

TRANSMITTAL LETTER

October 24, 2003

RE: CCA FINANCIAL, LLC

TO: Florida Department of State Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

FR: Maggie Ferdinand

Paranet Job No. 03-10-0310/mf

PLEASE FILE/SUBMIT THE FOLLOWING CHANGE OF AGENT APPLICATION ON BEHALF OF THE ABOVE COMPANY IN YOUR STATE.

UPON COMPLETION:

FAX EVIDENCE TO ME AT (800) 815-0477

REGULAR MAIL (STAMPED ADDRESSED ENVELOPE PROVIDED) CHECK NO 8298 AMOUNT: \$25.00 ENCLOSED

IF YOU HAVE ANY QUESTIONS, PLEASE CALL US USING OUR TOLL FREE NUMBER (800) 277-9977.

THANK YOU FOR YOUR EXCELLENT SERVICE®

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 limited liability company is: CCA FINANCIAL, LLC 2. The mailing address of the limited liability company is: 8080 AMF DRIVE, RICHMOND, VA 23111 M01000001423 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: C T Corporation System Name 1200 South Pine Island Road Address Plantation, FL 33324 City, State and Zip 6. The name and address of the new registered agent and/or office: NRAI Services, Inc. Name 526 E. Park Avenue Florida street address (P.O. Box NOT acceptable) Tallahassee City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. of a member or authorized representative of a member) Cheryl K. TOY, Assistant Secretary (Printed or typed name of signee) I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. NRAI Services has

FILING FEE: \$25.00

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

rdinand

(Signature of Repatered Agent)
Maggie Ferdinand, Asst. Secv.