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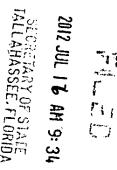
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J. SAULSBERRY EXAMINER JUL 18 2012

COVER LETTER

	tration Section ion of Corporations						
SUBJECT: VANGUARD FUNDING LLC							
Name of Limited Liability Company							
Dear Sir or M	1adam:						
The enclosed	Registered Agent/Registered	d Office	Change and	d fee(s) are submitted for fi	iling.		
Please return	all correspondence concerni	ng this m	atter to the	following:			
	JODY CROWLEY	,					
	Name of Person						
COR	PORATE SERVICE BURI	EAU INC	<u>}.</u>		SLORETARY OF STATE TALLAHASSEE, FLORIDA	2012 JUL	
	283 WASHINGTON AVEI	NUE	·		ARY OF S		
	ALBANY/NY 12206 City/State and Zip Code				ORIDA	9: 34	Para and
E-mail add	jvc@corporatebureau.co	om ort notificati	on)				
For further in	nformation concerning this m	atter, ple	ase call:				
	JODY CROWLEY	at (_	518)	463-8550 a Code & Daytime Telephone Num	her	_	
Regisi Divisi Clifto 2661 I	Name of Person EET/COURIER ADDRESS: tration Section ion of Corporations in Building Executive Center Circle massee, Florida 32301		MAIL Registr Division P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assee, Florida 32314	oer		
Enclosed is a check for the following amount:							
	5 Filing Fce	_		Filing Fee & Certified Copy	y		

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. Name of the limited liability company:	ANGUARD FUNDING LLC
2. (a) Principal office address of limited liability company	CORPORATE SERVICES BUREA
(Note: MUST BE STREET ADDRESS)	515 EAST PARK AVENUE TALLAHASSEE FL 32301
(b) Mailing address of limited liability company:	300 GARDEN CITY PLAZA, SUITE
(Note: MAY BE POST OFFICE BOX)	ATTN: LAURIE KING GARDEN CITY NY 11530
08/18/2005	M05000004618
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	CORPORATE SERVICE BUREAU INC.
Registered Office Address:	515 EAST PARK AVENUE TALLAHASSEE FL 32301
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> : NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	W Registered Office address: CORPORATE SERVICE BUREAU INC. 1540 GLENWAY DRIVE
(MUSI_BE FLORIDA STREET ADDRESS)	TALLAHASSEE,FL32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited hability company company of a member or authorized representative of a member Finted or typed name of signce I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my poor Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	wise provided in the articles of organization.
chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	sition as registered agent as provided for in rely reflect a change in the registered office y has been notified in writing of this change.

Signature of Registered Agent