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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Phone

Account Number : FCA000000023

: (850)222-1092

Fax Number

: (850)878-5368

REGISTERED AGENT CHANGE

ATLAS RECOVERY MANAGEMENT LLC

Certificate of Status	0
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Corporate Filing Menu

Help

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: Atlas Recovery !	Management LLC
2. (a) Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny: 640 Mendelssohn Ave N Golden Valley, MN 55427
(b) Mailing address of limited fiability company: (Note: MAY BE POST OFFICE BOX)	640 Mendelssohn Ave N Golden Valley, MN 55427
4/14/2008	M0900001705 70 9 7
3. Date of filing/registration in Florida	M08000001795 4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State
Registered Agent:	NRAI Services Inc.
Registered Office Address:	M08000001795 4. Document number the records of the Florida Dept. of States NRAI Services Inc. 2731 Executive Park Drive, Suite 4 Weston, FL 33331
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	· · · · · · · · · · · · · · · · · · ·
NEW Registered Agent:	C T Corporation System
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island Road
Hanney and the second s	Plantation FL 33324
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles climited liability company. [Signature of a member or authorized representative of a member]	et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
(Printed or typed name of signee)	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pray familiar with and accept the obligations of my position F.S. Or if this document is being filed to merely reflect a confirm that the limited liability company has been notified by:	agree to act in this capacity. I further agree to Oper and complete performance of my auties, and I 1 as registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing at this change.

FILING FEE: \$25.00

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incorporated under the laws of	the grate of Alle	* A C T Y OF B	not the direct
indirect owner of the subsidiary entitles, does hereby	appoint Jeanne Ne	lson and Mich	cle Miller
aployees of CT Corporation and acting solely in the c	apacity as employed	es of CT Corpo	oration, us 💇
torney-in-fact for the LLC to act for		and in t	he
LLC's name for the limited purposes authorized	herein.		
The LLC and the subsidiary entiti	es listed having tak	en all nearsain	o etane to
thorize the changes, hereby grants its attorney-in-fact	the power to execu	te the docume	nts neceksurv
change the LLL's and the subsidiary er	atities' registered as	ent and registe	red office, or
sugent and office of similar import, in any state to Cl	Corporation, as di	rected and aut	orized by the
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