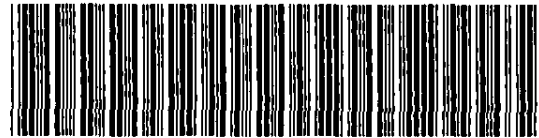


109000004146



600241902786

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

JAN 18 2013
L. SELLERS

Office Use Only

RECEIVED

13 JAN 17 AM 10: 54

SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

13 JAN 18 AM 10: 54

SECRETARY OF STATE
TALLAHASSEE FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 497143 7863725

AUTHORIZATION :

A handwritten signature in cursive script, appearing to read 'L. J. ...', is written over the authorization field.

COST LIMIT : \$ 25.00

ORDER DATE : January 15, 2013

ORDER TIME : 3:26 PM

ORDER NO. : 497143-004

CUSTOMER NO: 7863725

CHANGE OF AGENT

NAME: SAFEGUARD RECOVERY, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'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. Name of the limited liability company: SAFEGUARD RECOVERY, LLC
2. (a) Principal office address of limited liability company: 7668 Warren Parkway Ste 350, Frisco TX 75034
(b) Mailing address of limited liability company: 7668 Warren Parkway Ste 350, Frisco TX 75034

10/19/2009 M09000004146
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: CT Corporation System
Registered Office Address: 1200 South Pine Island Road
Plantation FL 33324

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Agent: Corporation Service Company
NEW Registered Office Address: 1201 Hays Street
(MUST BE FLORIDA STREET ADDRESS) Tallahassee, FL 32301

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.

Deb Reeves
(Signature of a member or authorized representative of a member)

Deb Reeves, Authorized Person
(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.

By: Sarah Wright
(Signature of Registered Agent) Corporation Service Company Sarah Wright, Asst. Vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

FILED
13 JAN 18 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FL