## M10 CCCCC 3390

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#### COVER LETTER

	ation Section n of Corporations			
SUBJECT:	Atlantic Credit & Finance Special Fi		<del></del>	
	Name of Limited	! Liability Company		
Dear Sir or Mac	dam:			
The enclosed Re	egistered Agent/Registered Office Change a	nd fee(s) are submitted for filing.		
Please return all	l correspondence concerning this matter to the	he following:		
Giovanna L	uevano			
<u>-</u>	Name of Person	<del></del>		
Midland Cre	edit Management, Inc.			
	Firm/Company	<del></del>	<b>2021</b> SEE	
350 Camino	o de la Reina, Suite 300		2021 FEB 22 SECRETARY FALLATIA	: 417 1 1 KEN
	Address		22   1965 1965	
San Diego, (	CA 92108		Y OF STATE	Ę
	City/State and Zip Code	<del></del>	ENE	1
licensing@n	ıcmcg.com			
E-mail add	dress: (to be used for future annual report no	otification)		
For further info	rmation concerning this matter, please call:			
Giovanna L	uevano at (= 858	309-9312		
	Name of Person	Area Code & Daytime Telephone Nu	umber	
Registr Divisio P.O. Bo	g Address: ration Section on of Corporations ox 6327 assec, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	0	
Enclose	ed is a check for the following amount:			
□ \$25 !	Filing Fee	\$55 Filing Fee & Certified Copy		

INHS18 (2/14)



January 14, 2021

GIOVANNA LUEVANO MIDLAND CREDIT MANAGEMENT, INC. 350 CAMINO DE LA REINA - STE. 100 SAN DIEGO, CA 92108

SUBJECT: ATLANTIC CREDIT & FINANCE SPECIAL FINANCE UNIT, LLC

Ref. Number: M10000003390

We have received your document for ATLANTIC CREDIT & FINANCE SPECIAL FINANCE UNIT, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 521A00000875

Irene Albritton Regulatory Specialist II

www.sunbiz.org

### STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. 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 Na	ime of the limited liability company:Atlar	ntic Ci	redit and	Finance Special Fina	nce Unit	, LLC	
<b>7</b> ()	111 Franklin Rd. SE, Suite 400		(b)	350 Camino de la Re	rina, Suit	e 100	
2. (a)	Principal office address of limited hability company:  (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)			
	Roanoke, VA 24011			San Diego, CA 92108			
	07/30/2010			M10000003390			
3.	Date of filing/registration in Florida	7	•	Document numb	er		
5. (a)	Corporation Service Company						
<i>31</i> (4)	Registered Agent and Registered Office shown on the records	of the F	londa Dept	, of State			
	1201 Hays Street						
	Registered Office Address (MUST BE FLORIDA STREE	TADD	RESS)	-		~	
					퍃볈	021	
	Tallahassee		32301			FEB 2	CECURA E E CECURA CONTROL CONT
(b)					AS% 0.000 €	2 PH	; [T]
(0)	Enter name of NEW Registered Agent and/or NEW Register	red Offi	ee <u>address</u>	:	1.1.5.a 1.1.1.ad	<u>.</u>	
	Midland Credit Management, Inc.				图	: 50	
	NEW Registered Office Address:						
	13008 Telecom Drive, Suite 350						
	Tampa	FL	33637				
change agent was/w	limited liability company is not organized under the core changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited tere authorized by an affirmative vote of the member iteles of organization or the operating agreement of the street agreement of the core and the street agreement of the operating agreement of the street agreement of the stree	the reg Hiabili rs of th	istered of ty compa e limited ited liabil	free and the business of ny, it is hereby confirm liability company or as ity company.	ed that the otherwise	e regis e chan e prov	ge(s)
	jeremiah viong		Jerem	iah Hong - Assistant			<b></b> -
	ature of a member or authorized representative of a member			Printed or typed in			
provis the ob- to met	rby accept the appointment as registered agent and a cions of all statutes relative to the proper and comple ligations of my position as registered agent as provi rely reflect a change in the registered office address, ed in writing of this change.	agree t ete per, ided fo . I here	o act in the formance r in Chap by confir	his capacity. I further a of my duties, and I am ter 605, F.S. Or, if this m that the limited liabil	igree to co familiar v documen ity compo	omply with ai it is be iny ha:	with the id accep- ing filed cheen
Signat	Terential: virig						

# FLSFU Statement of Change of Registered Agent - Draft

Final Audit Report

2021-02-16

Created:

2021-02-16

By:

Giovanna Luevano (Giovanna.Luevano@mcmcg.com)

Status:

Signed

Transaction ID:

CBJCHBCAABAA3uRoJ0vhm4vEM66JbtxFQXz80uEFAgCv

### "FLSFU Statement of Change of Registered Agent - Draft" History

- Document created by Giovanna Luevano (Giovanna.Luevano@mcmcg.com) 2021-02-16 4:57.21 PM GMT- IP address: 192.112.148.4
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