

771000002081

Florida Department of State  
Division of Corporations  
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LLC REGISTERED AGENT CHANGE  
INNOVATIVE FUNDING SERVICES, L.L.C.

Certificate of Status	0
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A. LUNT  
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**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: INNOVATIVE FUNDING SERVICES, L.L.C.

2. (a) Principal office address of limited liability company: 14205 N Burnet Rd Ste. 400,

(Note: **MUST BE STREET ADDRESS**)

Austin, Texas 78728

(b) Mailing address of limited liability company:

14205 N Burnet Rd Ste. 400,

(Note: **MAY BE POST OFFICE BOX**)

Austin, Texas 78728

4/26/2011

3. Date of filing/registration in Florida

4. Document number

M11000002081

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

NORTHWEST REGISTERED AGENT, LLC.

Registered Office Address:

3111 W. DR. MLK BLVD., STE 100-B180  
TAMPA FL 33607 US

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:**

C T Corporation System

**NEW Registered Office Address:**

1200 South Pine Island Road,

**(MUST BE FLORIDA STREET ADDRESS)**

Plantation, FL 33324

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.

Mark Williams  
Signature of a member or authorized representative of a member

Mark Williams, Manager

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.

Mark Williams  
Signature of Registered Agent  
Mark Williams, AVP, C T Corporation System

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

FILING FEE: \$25.00

INHIS18 (05/08)

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