

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000001610

1. Entity Name  
TCC FUNDING COMPANY, L.L.C.

Principal Place of Business  
650 CIT DRIVE  
LIVINGSTON NJ 07039

Mailing Address  
650 CIT DRIVE  
LIVINGSTON NJ 07039

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name CT Corporation System  
Street Address (P.O. Box Number is Not Acceptable)  
1200 South Pine Island Road  
City Plantation FL Zip Code 33324

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

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-06/18/01--01005--015

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

\*\*\*\*\*50.00 \*\*\*\*\*50.00

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

BK

9. MANAGING MEMBERS/MEMBERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FORD, ANDREW J 250 PARK AVENUE NEW YORK NY 10177	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VIGDAL, DEBORAH L 220 SOUTH SIXTH STREET MINNEAPOLIS MN 55402	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HALL, GARY 220 SOUTH SIXTH STREET MINNEAPOLIS MN 55402	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member CIT Technologies Corporation 650 CIT Drive Livingston NJ 07039	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	member CIT Technology Financing Services, Inc. 650 CIT Drive Livingston NJ 07039	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	member CIT Lending Services Corporation 650 CIT Drive Livingston NJ 07039	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member CIT Communications Finance Corporation 650 CIT Drive Livingston NJ 07039	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Glenn Votek 650 CIT Drive Livingston NJ 07039	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Independent Director Peter Sorensen 650 CIT Drive Livingston NJ 07039	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Glenn Votek

973-740-5000

FILED

01 MAY 17 AM 9:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

0028460 AF

CR2E083 (11/00)

**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. The name of the limited liability company is: TCC Funding Company, LLC.

2. The mailing address of the limited liability company is : \_\_\_\_\_

650 CIT DRIVE LIVINGSTON NJ 07039

10-11-99

M99000001610

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Corporation Service Company

Name

1201 Hays Street

Address

Tallahassee, FL 32301

City, State and Zip

6. The name and address of the new registered agent and/or office:

C T Corporation System

Name

1200 South Pine Island Road

Florida street address (P.O. Box NOT acceptable)

Plantation

FL 33324

City, State and Zip

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.

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

Glenn A. Votek, 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.*

C T Corporation System

Assistant Secretary

  
(Signature of Registered Agent)

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

FILED  
01 MAY 17 AM 9:59  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

FILED  
00 DEC 15 PM 3:50  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE