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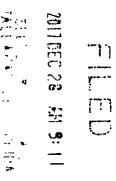
(Requestor's Name)						
(Address)							
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(City/State/Zip/Phone #)						
PICK-UP	WAIT MAIL						
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates of Status						
Special Instructions to Filing Officer:							

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RARDICHE

JAN 3 - 2010 LALBRITTON



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

REGISTRATION SECTION DIVISION OF CORPORATIONS To:

Ami Casper ami.casper@cscqlobal.com From:

Date: December 26, 2017

Order#: 981328/005

Re: R.V. LENDING GROUP OF FLORIDA INC.

Enclosed please find:

XX Change of Registered Agent and Office. XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.
XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted	ctions 607.0502, 617 d for a corporation of registered office or re	organized under ti	he lav	ws of the State o	Florida	
1. The name of t	he corporation;	R.V. LENDING GR	OUP OF FLORIE	DA IN	IC.		
2. The principal	office address:	236 Canal Bouleva	rd, Suite 4, Ponte	e Ved	ra Beach, FL 3		
3. The mailing a	iddress (if differ	rent):					
4. Date of incorp	poration/qualifi	cation: 03/23/2009	Docui	ment	number: P090	00027697	
5. The name and Florida Depart	d street address rtment of State:	of the current registe (If resigned, enter re	ered agent and reg esigned)	gistere	ed office on file	with the	
	Kevin Marsh						
	236 Canal Boulevard, Suite 4						
	Ponte Vedra l	Beach, FL 32082	···			_ 76.5 A.S. 76.11	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):							
	Corporation S	ervice Company				_ = [
	1201 Hays St		 -			_	
	Tallahassee	P.O. Bo	x NOT acceptable	FL	32301		
		ered office and the s y resolution duly ad corporation has be				f its registered agent,	
16	m		Kevin Ma			4	
I hereby accept I further agree performance of agent. Or, if the hereby confirm	to comply with f my duties, and his document is	nt as registered age the provisions of al I I am familiar with being filed merely t ration has been noti	i statutes relative and accept the or o reflect a chang	act in e to th bliga ge in t	ne proper ana c tion of my posit he registered o	complete tion as registered	
By: Co	m Lei	Agent	1	12/26	6/2017 Date	_	
·	ehalf of an enti	-					
5 5	r, Asst. Vice Pr						
	Typed or Printed Nan	ne					

* * * FILING FEE: \$35.00 * * *