I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MGRM

SIGNATURE: JAMES T. MURPHY

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L08000100861

Entity Name: CONTINENTAL FINANCE, LLC

Current Principal Place of Business:

1150 CENTRAL AVENUE NAPLES. FL 34102

Current Mailing Address:

1150 CENTRAL AVENUE NAPLES. FL 34102

FEI Number: 26-3628142

Name and Address of Current Registered Agent:

FROST, IRWIN M 1111 BRICKELL AVENUE **SUITE 2050** MIAMI, FL 33131 US

The above na

SIGNATU

Authorize

Title	MGRM	Title	MGRM		
Name	MURPHY, JIM/MAUREEN TE	Name	THE MURPHY FAMILY LIMITED PARTNERSHIP TWO		
Address	1150 CENTRAL AVENUE				
City-State-Zip:	NAPLES FL 34102	Address	1150 CENTRAL AVENUE		
		City-State-Zip:	NAPLES FL 34102		

amed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.						
URE	Ξ:					
	Electronic Signature of Registered Agent			Date		
ed	Person(s) Detail :					
	MGRM	Title	MGRM			
	MURPHY, JIM/MAUREEN TE	Name	THE MURPHY FAMILY LIMITED PARTNERSHIP TWO			

FILED Feb 08, 2016 Secretary of State CC1157243480

Certificate of Status Desired: No

02/08/2016 Date