Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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F11	Address:			
rmaıı	ANDLESS.			

REGISTERED AGENT CHANGE NATIONAL ASSOCIATION OF MORTGAGE BROKERS, INC.

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

statement of cho	inge is submitted for a corporation	517,0502, 607,1508, or 617,1508. Florida Statutes, the organized under the laws of the State of <mark>Florida</mark> registered agent, or both, in the State of Florida.	iis
1. The name of	the corporation: NATIONAL AS	SSOCIATION OF MORTGAGE BROKERS	S, INC.
		nia Ave, NW South Building Suite 900	
-	District of Columbia 20004		
3. The mailing a	nddress (if different):		
_		Document number: 727253	
	I street address of the current regis rtment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	Saunders, Valerie		
	4651 Salisbury Road Ste.	400	20
	Jacksonville, FL 32256	<u> </u>	23 HA
6. The name and (if changed):	I street address of the new register	red agent (if changed) and /or registered office	2023 HAR -3 1
	Registered Agents Inc		. A 8
	7901 4th St N STE 300	근	8: 16
		P.O. Box NOT acceptable	O ·
	St. Petersburg FL 3370)2	
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registere	ed agent,
Such change wa authorized by th	as authorized by resolution duly a ne board, or the corporation has b	ndopted by its board of directors or by an officer so seen notified in writing of the change.	
<i>J.M.</i> Signatu	la MD Gy re of an office or director	Linda McCoy - President Printed or typed name and title	
l further agrée of my duties, an docúment is bei	the appointment as registered ay to comply with the provisions of a Id I am familiar with and accept to ing filed merely to reflect a chang s been notified in writing of this c	gent and agree to act in this capacity, all statutes relative to the proper and complete perf the obligation of my position as registered agent. C ge in the registered office address, I hereby confirm hange.	formance Or, if this that the
I willydester	nature of Registered Agent	03/03/2023	
_		Date	
	half of an entity:		
David Rob	erts vped or Printed Name	-	
1	Species ranger Same		

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