M12000000070

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

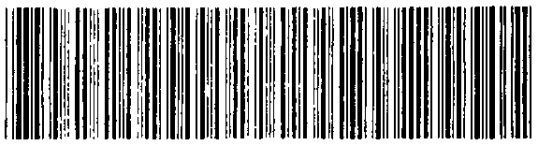
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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DEPARTMENT OF STATE
16 AUG 26 PM 2:01

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2016 AUG 26 AM 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. DALY
EXAMINER
AUG 29

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 268173 7286385

AUTHORIZATION: [signature]

COST LIMIT : $ 25.00

ORDER DATE : August 26, 2016

ORDER TIME : 11:24 AM

ORDER NO. : 268173-005

CUSTOMER NO: 7286385

FOREIGN FILINGS

NAME: CORELOGIC SAFERENT, LLC

CORPORATE
LIMITED PARTNERSHIP
XX LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of State: CoreLogic SafeRent, LLC

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TALLAHASSEE, FLORIDA

Enter new principal office address, if applicable: _____

(Principal office address MUST BE A STREET ADDRESS) _____

_____

Enter new mailing address, if applicable: _____

(Mailing address MAY BE A POST OFFICE BOX) _____

_____

2. The Florida document number of this limited liability company is: M12000000070

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: January 4, 2012

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company, " "L.L.C.," or "LLC.")

CoreLogic Rental Property Solutions, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____
Enter Florida Street Address

_____, **Florida** _____
City *Zip Code*

New Registered Agent's Signature, if changing Registered Agent:
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 605, 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.

_____
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

_____

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

_____

Title/ Capacity	Name	Address	Type of Action
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove
_____	_____	_____	☐ Add
		_____	☐ Remove

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TALLAHASSEE, FLORIDA

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

_____
Signature of the authorized representative

David R. Hayes, Vice President, Finance/Treasurer

Typed or printed name of signee

Filing Fee: $25.00

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "CORELOGIC SAFERENT, LLC", CHANGING ITS NAME FROM "CORELOGIC SAFERENT, LLC" TO "CORELOGIC RENTAL PROPERTY SOLUTIONS, LLC", FILED IN THIS OFFICE ON THE TWELFTH DAY OF MAY, A.D. 2016, AT 8:37 O`CLOCK P.M.

Jeffrey W. Bullock, Secretary of State

3040669 8100
SR# 20165337101

Authentication: 202817317
Date: 08-12-16

You may verify this certificate online at corp.delaware.gov/authver.shtml

State of Delaware
Secretary of State
Division of Corporations
Delivered 08:37 PM 05/12/2016
FILED 08:37 PM 05/12/2016
SR 20163160997 - File Number 3040669

STATE OF DELAWARE
CERTIFICATE OF AMENDMENT

1. Name of Limited Liability Company: CoreLogic SafeRent, LLC

2. The Certificate of Formation of the limited liability company is hereby amended as follows: Article First is amended to read:

The name of the limited liability company is:

CoreLogic Rental Property Solutions, LLC

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2016 AUG 26 AM 8:51
JEFFREY W. BULLOCK
SECRETARY OF STATE
FALLS HARBOR, FLORIDA

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 12 day of May, A.D. 2016.

By: _____
Authorized Person(s)

Name: Stergios Theologides
Print or Type