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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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CORPORATION SERVICE COMPANY

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

	ACCOUNT NO.	: I20000001	95
	REFERENCE	: 288224	
	AUTHORIZATION	: Spull de	man
	COST LIMIT	: \$ 25.00	
ORDER DATE : S	eptember 12, 201	16	
ORDER TIME :	5:43 PM		
ORDER NO. : 2	88224-005		
CUSTOMER NO:	8109734		
		·	
	CHANGE OF AC	<u>GENT</u>	
NAME:	MINNTRUST MORT	rgage, LLC	
PLEASE RETURN T	HE FOLLOWING AS	PROOF OF FILI	NG:
CERTIFI YXX PLAIN S'			
TALL PLINTIN D	IMMEED COFT		
CONTACT PERSON:	Melissa Zender	<u>.</u>	

EXAMINER'S INITIALS:

COVER LETTER

TO: Registration Section

Divi	sion of Corporations				
SUBJECT:	MinnTrust Mortgage, LLC				
JOBODOT.	Name of Limited Liability Company				
Dear Sir or l	Madam:				
The enclose	d Registered Agent/Registered Office	: Change and f	(ee(s) are submitted for filing.		
Please return	n all correspondence concerning this	matter to the f	following:		
Jill M. Brow	n				
	Name of Person		_		
MinnTrust N	Mortgage LLC				
	Firm/Company		-		
1650 82nd 9	Street West, #275				
	Address		_		
Bloomingto	n, MN 55431				
	City/State and Zip Code				
jill@minntru	ist.com				
E-mail	address: (to be used for future annua	l report notific	cation)		
For further i	information concerning this matter, pl	lease call:			
Jill Brown		952 at (884-3011		
	Name of Person	,	Area Code & Daytime Telephone Number		
Reg Div Clif 266	REET/COURIER ADDRESS: distration Section distration of Corporations from Building 1 Executive Center Circle dahassee, Florida 32301	Reg Div P.O	AILING ADDRESS: gistration Section rision of Corporations Box 6327 lahassee, Florida 32314		
Enc	closed is a check for the following a	mount:			
□ \$	225 Filing Fee	□ \$5:	5 Filing Fee & Certified Copy		
INHS18 (2/14	4)				

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	me of the limited liability company: MinnTrust Mortga	age LLC	2
2.	(a)	1650 W 82nd St. #275,Bloomington,MN 55431 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.		09-12-2016 Date of filing/registration in Florida	- - 4.	M16000007205 Document number
5.	(a)	Collins Brown Barkett Garavaglia & Lawn		
٠.	(4)	Registered Agent and Registered Office shown on the records of the	ne Florida	a Dept. of State:
		756 Beachland Boulevard, Vero Beach FL 32963		
		Registered Office Address (MUST BE FLORIDA STREET A.	DDRESS)	<u></u>
		756 Beachland Boulevard		
		Vero Beach , FL_	32963	3
	(b)	Corporation Service Company		
		Enter name of NEW Registered Agent and/or NEW Registered (Office add	Idress:
		1201 Hays Street		
		NEW Registered Office Address:		TARY OF I
		Tallahassee , FL	32301	♀ 0
th aş w	e cha gent v as/w	imited liability company is not organized under the law inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regis ibility co f the lim	istered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in
	<	X CLOS		Jill BROWN
_	Signa	ture of a member or authorized representative of a member	 	Printed or typed name of signee
th to	e obi e mer	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete igations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	ee to act performa I for in C vereby co	t in this capacity. I further agree to comply with the tance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed confirm that the limited liability company has been
_		M. Fanden		Melissa Zender
S	ignati	re of Registored Agest Corporation Service Company	BY:As	asst. Vice President
		Division of Corporations P.O. B	3ox 6327	7• Tallahassee, FL 32314

FILING FEE: \$25.00