# 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.

SIGNATURE: CLARA RAIJMAN

#### Current Principal Place of Business: 1135 KANE CONCOURSE

Entity Name: METROPOLITAN MORTGAGE SERVICES, LLC

2ND FLOOR BAY HARBOR ISLANDS, FL 33154

DOCUMENT# L09000119089

### **Current Mailing Address:**

PO BOX 402188 MIAMI BEACH, FL 33140

# FEI Number: 27-3578203

#### Name and Address of Current Registered Agent:

STEIN, ERIC P ESQ. 1820 NE 163 STREET SUITE 100 NORTH MIAMI BEACH, FL 33162 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ERIC P. STEIN

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

TitleMGRNameRAIJMAN, CLARAAddressPO BOX 402188City-State-Zip:MIAMI BEACH FL 33140

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 29, 2019 Secretary of State 4140321773CC

Certificate of Status Desired: No

04/29/2019

Date

04/29/2019 Date

Electronic Signature of Signing Authorized Person(s) Detail

MGR