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: RENALDY J. GUTIERREZ

Electronic Signature of Signing Authorized Person(s) Detail

FEI Number: 46-3470564 Name and Address of Current Registered Agent:

GUTIERREZ & ASSOCIATES, PL 1200 BRICKELL AVE. SUITE 350 MIAMI, FL 33131 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:

Authorized Person(s) Detail : Title MGRM Title PS RENALDY J. GUTIERREZ, P.A. Name GUTIERREZ, RENALDY J Name 1200 BRICKELL AVE. SUITE 350 Address 1200 BRICKELL AVE. SUITE 350 Address City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Certificate of Status Desired: No

MGRM

01/26/2017

Date

Date

FILED Jan 26, 2017 Secretary of State CC1373344817

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000115001

Entity Name: COLLATERAL AGENCY SERVICES LLC

Electronic Signature of Registered Agent

Current Principal Place of Business:

1200 BRICKELL AVE. SUITE 350 MIAMI, FL 33131

Current Mailing Address:

1200 BRICKELL AVE. SUITE 350 MIAMI. FL 33131