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(Requestor's Name)

Registered Agent Solutions, Inc.
515 Congress Ave., Ste. 2300
Austin, TX 78701
Attn: COA Dept.

(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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02/22/11--01018--004 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAR -8 PM 1:59

RA/change
10 3/8/11

VIA US MAIL

Florida Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: **HomeGain.com, Inc.**

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
2. \$35.00 to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Respectfully,

A handwritten signature in black ink, appearing to read 'Leena Reyes', with a stylized flourish at the end.

Leena Reyes
REGISTERED AGENT SOLUTIONS, INC.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 22, 2011

REGISTERED AGENT SOLUTIONS, INC.
515 CONGRESS AVE
SUITE 2300
AUSTIN, TX 78701

SUBJECT: HOMEGAIN.COM, INC.
Ref. Number: F00000001233

We have received your document for HOMEGAIN.COM, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 011A00004451

RECEIVED
11 MAR -8 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: HOMEGAIN.COM, INC.
2. The principal office address: 6001 SHELLMOUND STREET
SUITE 550, EMERYVILLE CA 94608
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/28/2000 Document number: F00000001233
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

NRAI SERVICES, INC.

155 Office Plaza Dr., Suite A
Tallahassee, FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Registered Agent Solutions, Inc.

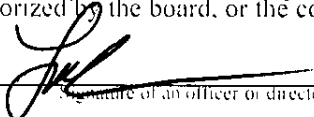
155 Office Plaza Dr., Suite A

P.O. Box NOT acceptable

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Name of an officer or director

LOUIS CAMMAROSANO / SECRETARY

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

2/17/2011

Date

If signing on behalf of an entity:

Jennifer Escobedo, Assistant Secretary

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314