

Florida Department of State

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(((H07000160135 3)))



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REGISTERED AGENT CHANGE

ROSE MORTGAGE SERVICES INC.

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6/18/2007 JUN-22-2007



June 18, 2007

FLORIDA DEPARTMENT OF STATE

Division of Corporations

ROSE MORTGAGE SERVICES INC. 1160 PARSIPPANY BLVD. 2ND FLOOR PARSIPPANY, NJ 07054

SUBJECT: ROSE MORTGAGE SERVICES INC.

REF: F02000003059

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P.O BOX 6327 - Tallahassee, Florida 32314

H07000160135 3

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

	he provisions of sections 607.0502, of change is submitted for a corporal in order to change its regist	•	he State of
	f the corporation: Rose Marty	age Services Inc.	- John in the State
2. The princip	al office address: 1160 Parsippany BI	vd., 2nd Ft., Parsippany, NJ 07054	
3. The mailing	g address (if different):		
4. Date of inco	orporation/qualification: 6/17/2002	Document number:	F02000003059
	nd street address of the current registe artment of State: Business Filings Incorporated		file with the
<i>.</i> ·	660 EAST JEFFERSON STREET		
٠.	TALLAHASSEE FL 32301		OT J
6. The name and street address of the new registered agent (if changed) and /or registered office changed): Business Filings Incorporated			
	1203 Governors Square Blvd., Suite (P.O. Box or personal ma	101 milbox NOT acceptable)	OF STATE E. FLORID
The street add	ress of its registered office and the st	reet address of the business offic	e of its registered
	vas authorized by resolution duly add the board, or the corporation has bee		
I hereby accep I further agree performance o	er, chuirman or vice chairman of the board) of the appointment as registered agent to comply with the provisions of all of my duties, and I am familiar with a nt. Or, if this document is being file. I hereby confirm that the corporation	(Printed or typed name and title) at and agree to act in this capacit statutes relative to the proper an and accept the obligation of my p	y id complete osition as
	Signature of Registered Agent)	5/4/07 (Date)	<u></u>
if signing on beha Terese Coultha	alf of an entity:	Asst Secretary	
	(Typed or Printed Name)	(Capacity)	

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

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