F0300002772

| (Requestor's Name) |
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| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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(2 8 2023

CORPORATION SERVICE COMPANY 1201 Hays Street

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

| ACCOUNT NO. : I2000000195 | | | | | | |
|---|--|--|--|--|--|--|
| REFERENCE : 691305 8411035 | | | | | | |
| AUTHORIZATION: Jule Bleman | | | | | | |
| COST LIMIT : \$35.00 | | | | | | |
| ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | | | | | |
| ORDER DATE : April 21, 2023 | | | | | | |
| ORDER TIME : 9:38 AM | | | | | | |
| ORDER NO. : 691305-011 | | | | | | |
| CUSTOMER NO: 8411035 | | | | | | |
| | | | | | | |
| CHANGE OF AGENT | | | | | | |
| | | | | | | |
| | | | | | | |
| NAME: MLD MORTGAGE INC. | | | | | | |
| | | | | | | |
| | | | | | | |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | | | | | | |
| CERTIFIED COPY | | | | | | |
| XX PLAIN STAMPED COPY | | | | | | |
| | | | | | | |
| CONTACT PERSON: Eyliena Baker | | | | | | |
| EXAMINER'S INITIALS: | | | | | | |

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

N.

| statement of cha | provisions of sections 607.0502, inge is submitted for a corporation r to change its registered office o | on organized under the law | s of the State of N | lew Jersey | |
|---|---|--|--|----------------|--|
| 1. The name of t 2. The principal | he corporation: MLD MORTGAC office address: 30 B VREELAN | GE INC. D ROAD FLORHAM PAR | K, NJ 07932 | | |
| 3. The mailing a | ddress (if different): | | | • | |
| 4. Date of incorp | poration/qualification: 06/02/200 | Document n | umber: _F0300000 |)2772 | |
| | I street address of the current reg tment of State: (If resigned, ente | 3 0 | d office on file with | n the | |
| | REGISTERED AGENTS INC. | | | | |
| | 7901 4TH ST. N STE 300 | | | | |
| | ST. PETERSBURG | FL | 33702 | | |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered offic | | | 2023 APR 2 | |
| | 1201 Hays Street | | | | |
| | P.O. Box NOT acceptable | | | 9 | |
| | Tallahassee | FL | 32301 | ر٦ | |
| | ss of its registered office and the identical. Is authorized by resolution duly be board, or the corporation has | | | | |
| م بن | Coni | Jill Cilmi | | Vice President | |
| I hereby accept I further agree t of my duties, and document is beh corporation has | e of an officer or director the appointment as registered a o comply with the provisions of all am familiar with and accept ng filed merely to reflect a chan been notified in writing of this n Service Company | igent and agree to act in to all statutes relative to the the obligation of my posi- ige in the registered office | d or typed name and title his capacity, e proper and comp tion as registered address, I hereby | | |
| = | Kubl lature of Registered Agent | 04/25/2023 | | | |
| | nature of Régistered Agent | | Date | | |
| Grace E. Kirby, / | Asst. Vice President | | | | |
| Ту | ped or Printed Name | - | | | |

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