

F04000005393

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H12000140957 3)))



H120001409573ARC3

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : US CORPWORKS INC.  
Account Number : I20070000066  
Phone : (303) 393-8800  
Fax Number : (303) 393-8900

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE  
NATIONS HOME LOANS CORPORATION**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

2012 MAY 29 A 3:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

2012 MAY 29 PM 8:12

NOT RECORDED  
TO AGENCY OF RECORD  
SUFFICIENCY OF FILING

MAY 29 2012

T. LEMIEUX

05/29/2012 12:03 NRAI Corporate

(FAX)3033938900

P.002/004

v2w72

Division of Corporations

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Nations Home Loans Corporation

Name of Corporation

**DOCUMENT NUMBER:** F04000005393

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Mirrione

Name of Contact Person

NRAI Corporate Services

Firm/Company

1675 Broadway, Suite 1200

Address

Denver, CO 80202

City/State and Zip Code

eric.roman@nrahomeloans.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Mirrione

at 303 393.8800

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

CR2E045 (03/12)

**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 OH in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Nations Home Loans Corporation
2. The principal office address: 4 Summit Park Drive, Suite 200, Independence, OH 44131
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 09/22/2004 Document number: F04000005393
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)

Aveni, Joe

26313 Mahogany Pl. Ct.

Bonita Springs, FL 34134

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

NRAI Services, Inc.

315 East Park Avenue, Tallahassee, Florida 32301

P.O. Box NOT acceptable

2012 MAY 29 A 3:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

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.

*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.*

By: NRAI Services, Inc. 05/29/2012  
Signature of Registered Agent Date

Jeremy Sopko, CEO

Printed or typed name and title

Signature of an Officer or Director

If signing on behalf of an entity:

Michael Mirrione, Asst. Secy.

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

CR2E045 (03/12)