> 02/04/2021 12:58 PM 15129570210 → 18506176380 state artr n sion of Corporations **Electronic Filing Cover Sheet** 

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<i>i</i> 4:	To: Division of Corporations Fax Number : (850)617-6380		
; ć	From:		
-	Account Name : REGISTERED AGENT Account Number : 120100000062	SOLUTIONS INC	ÇD
• 1	Phone : (888)705-7274		50
	Fax Number : (888)706-7274		~~~~
i i dig	**Enter the email address for this business annual report mailings. Enter only on Email Address: REGISTERED AGENT FFC MORTGAGE	e email address please.**	
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### **COVER LETTER**

TO: Amendment Section Division of Corporations

## FFC Mortgage Corp

SUBJECT: \_\_\_\_\_ Name of Corporation

# DOCUMENT NUMBER: F0500004248

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:

## Zachary Ysais

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd, Suite 300

Address

Austin, Texas 78744

.

City/State and Zip Code

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

For further information concerning this matter, please call:

Zachary Y sais	at (	) <sup>705-7274</sup>
Name of Contact Person	Area Code a	& 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

statement of cha	provisions of sections 607.0502, 6 nge is submitted for a corporation r to change its registered office of	n organizea	d under the law	s of the State	of <u>New</u>	York	
1. The name of t	he corporation: FFC Mortgag	le Corp					
	office address: 70 Linden Oal		30 ROCHE	STER, N	Y 14625	5	
3. The mailing a	ddress (if different):	. <u></u>					<u> </u>
4. Date of incorporation/qualification: 7/22/2005 Document number: F05000004						1248	
	street address of the current registment of State: (If resigned, enter	resigned)	it and registered	l office on ti	le with the	;	
	17888 67TH COURT NOP	TH					
	LOXAHATCHEE		FL.	33470	·····	2	Ø
6. The name and (if changed):	street address of the new register	red agent (i	if changed) and	/or registere	d office	1021 FEB -	
	Registered Agent So	lutions	, Inc.			Ļ	
	155 Office Plaza Dr.		Suite A		 	0	$\Box$
			IT acceptable		- <u></u>		

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.

151 Gene O'Bryan Signature of an officer or director

Gene O'Bryan P

President

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.

Hockerzu Ht Signature of Registered Agent

02/04/2021

Date

If signing on behalf of an entity:

Mackenzie Hart, 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 CR2E045 (04/13)

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