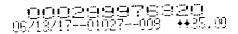
## F05000004426

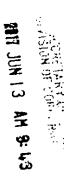
	(Requestor's Name)		
	(Address)		
	(Address)		
	(City/State/Zip/Phone #)		
PICK-UF	P WAIT MAIL		
	(Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

Office Use Only



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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: June 9, 2017

Order#: 674740-007

Re: PRIME MORTGAGE LENDING, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

<u>XX</u> Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA



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

statement of cha	nge is submitted for a corporat	, 617,0502, 607,1508, or 617,1508, Florida Statutes, this ion organized under the laws of the State of <mark>NC</mark> or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: PRIME MORTO	GAGE LENDING, INC.
	office address: M STREET, SUITE 300 APEX	( NC 27502
3. The mailing a	ddress (if different);	
4. Date of incorp	ooration/qualification: 08/01/20	Document number: F05000004426
	street address of the current retiment of State: (If resigned, ent	gistered agent and registered office on file with the er resigned)
	INCORP SERVICES, INC	
	17888 67TH COURT NORTH	
	LOXAHATCHEE	FL 33470
6. The name and (if changed):	street address of the new regist	tered agent (if changed) and /or registered office
	Corporation Service Company	/ · · · · · · · · · · · · · · · · · · ·
	1201 Hays Street	# 5°
		) Boy NOT acceptable
	Tallahassee	FL 32301
The street addreas changed will	ss of its registered office and t be identical.	he street address of the business office of its registered agent,
Such change wa authorized by th	s authorized by resolution duly e board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.
Xel		Jill Cilmi, Vice President
(hereb) accept Starter agree to performance of agent. Or, if thi hereby confirm to	o comply with the provisions o my duties, and I am familiar w s document is being filed mere	Printed or typed name and title agent and agree to act in this capacity, if all statutes relative to the proper and complete ith and accept the obligation of my position as registered by to reflect a change in the registered office address. I iotified in writing of this change.
By) Jug	e Ctuble	06/09/2017
•	nature of Registered Agent	Date
If signing on bel	Asst. Vice President	
	ped or Printed Name	_

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