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.

(((H10000256496 3)))



H100002564963A8C0

To:			. سند
•••	Division of C	2 9	
	Fax Number	: (850)617-6380	FO E
		, (22-12-1 24-2	10 B
Prom:			元 (以
	Account Name	: C T CORFORATION SYSTEM	જૂં તે
	Account Numbe	r : FCA000000023	
	Phone	: (850)222-1092	
	Fax Number	: (850)878-5368	77. 75
			ب ب

ECHERRY OF STATE

REGISTERED AGENT CHANGE AGFS MORTGAGE LENDING, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

11/29/2010

COVER LETTER

TO: Amendme Division o	ant Section of Corporations	·
Subject:	AGFS Martgage Lea	- -
	Name of Co	rporation
DOCUMENT NU	MBER:F060	000001894
The enclosed State	ment of Change of Registered Office	Agent and fee are submitted for filing.
Please return all co	rrespondence concerning this matter	to the following:
•	Name of Con	act Person
		·
	Firm/Con	npany
	Addre	96
	•	
	City/State and	Zip Code
	tblythe@aglina	noc.com
	E-mail address: (to be used for fut	ure annual report notification)
For further informat	ion concerning this matter, please cal	L :
	e of Contact Person	at () Area Code & Daytime Telephone Number
Nam	o I Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00	check made payable to the Departme	ent of State.
	Mailing Address:	Street Address: Amendment Section
	Amendment Section	Amendment Section Division of Corporations
	Division of Corporations P.O. Box 6327	Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (\$405)

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

statement of ch	ange is submitted for a co	erporațion organiz	607.1508, or 617.1508, Flork A under the laws of the State o A agent, or both, in the State o	of Delaware	
	the corporation: AGFS M			y Pionaa.	
	l office ældress:_ COND STREET EVANS				
3. The mailing	address (if different):	·			
4. Date of incor	poration/qualification:	2/13/2006	Document number:	F06000000894	
	d street address of the current of State: (If resigna		nt and registered office on file	` '	
	CORPORATION SERVICE COMPANY		ALC SEC	#20g	
	1201 Hays Street Tallahassee FL 32301-2525		LAHAS	gart.	
		, 			
6. The name and (if changed):	I street address of the new	registered agent (if changed) and for registered of	AM 10: 14 E. FLORID	
	C T Corporation System				
	c/o C T Corporation Syste	an, 1200 South Pine	: Island Road		
	Plantation, Florida 33324	P.O. Box NOT so	copsuble	*******	
The street addre			dress of the business office of	f its registered agent,	
			y its board of directors or by sed in writing of the change.		
,	1-2-		Kimberly Breunling, Vi		
	of an officer of director		Printed or typed name and		
hereby accept further agree to fmy duties, and locument is beli corporation has	the appointment as regts o comply with the provis d I am familiar with and ng filed merety to reflect been notified in writing	nered agent and a tions of all statute accept the obliga a change in the re of this change.	gree to act in this capacity. I relative to the proper and a dan of my position as registe. Legistered office address, I her	omplete performance red agent. Or, if this reby confirm that the	
	Corporation System	II.	11/22/2010 Date		
f signing on bel	nalf of an entity:		. p.415		
	Andatant Sacra Reheoga Ba				
Ty	ped or Printed Name	* FILING FEE:	\$35.00 * * *		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahasseb, FL 32314 CR2E045 (8/05)