

5/10/2013 9:10:22 From: To: 3506175380

(1/6)

Division of Corporations

Page 1 of 1

F11000004138

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.

(((H13000105915 3)))



H130001059153ABCZ

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 : C T CORPORATION SYSTEM
Account Number : FCA0000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

13 MAY -9 PM 2:29

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

Email Address: _____

RECEIVED

13 MAY 10 AM 8:03

OFFICE OF THE
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE
SKYLINE FINANCIAL CORP.

Certificate of Status	0
Certified Copy	0
Page Count	023
Estimated Charge	\$35.00

RE-SUBMIT

Please retain original filing
date of submission 5/9

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Skyline Financial Corp.
Name of Corporation

DOCUMENT NUMBER: F11000004138

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:

Debbie Nichols

Name of Contact Person

Skyline Financial Corp.

Firm/Company

27001 Agoura Rd. Suite 350

Address

Calabasas, CA 91301

City/State and Zip Code

dnichols@skylinehomeloans.com

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

For further information concerning this matter, please call:

Debbie Nichols

Name of Contact Person

at 818 657-2245

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

850-817-8381

5/9/2013 3:20:43 PM PAGE 1/001 Fax Server



May 9, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SKYLINE FINANCIAL CORP.
27001 AGOURA ROAD
SUITE 350
CALABASAS, CA 91301US

SUBJECT: SKYLINE FINANCIAL CORP.
REF: F11000004138

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Teresa Brown
Regulatory Specialist II

FAX Aud. #: H13000105168
Letter Number: 113A00011581

RE-SUBMIT

Please retain original filing
date of submission 5/9

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

1. The name of the corporation: Skyline Financial Corp.
2. The principal office address: 27001 Agoura Rd. Suite 350
Calabasas, CA 91301
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 10/12/2011 Document number: F11000004138
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)

Gary Rosenberg

203 Summerside Ct.

Apollo Beach, FL 33572

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

CT Corporation System

1200 S Pine Island Rd.

P.O. Box NOT acceptable

Plantation, FL 33324

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.


Signature of an officer or director

Christopher Weinstock, Chief Legal Officer

Printed or typed name and title

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.


Signature of Registered Agent

May 9, 2013
Date

If signing on behalf of an entity:

Connie Bryan
Typed or Printed Name

Assistant Secretary

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2F045 (03/12)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 MAY -9 PM 2:29