

F13600003460

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

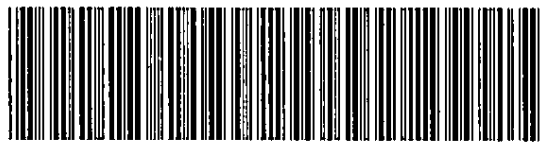
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 01 2017

T. J. F. M. E. U.

Handwritten signature/initials

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Regent Mortgage Corporation
Name of Corporation

DOCUMENT NUMBER: F13000003460

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:

MARK LONDON
Name of Contact Person

Regent Mortgage Corporation
Firm/Company

980 BIRMINGHAM RD #501-356
Address

MILTON GA 30004
City/State and Zip Code

MARK@RegentMTG.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARK LONDON at (954) 682-9952
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

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

1. The name of the corporation: Regent Mortgage Corporation
2. The principal office address: 980 BIRMINGHAM RD #501-356
MILTON GA 30004
3. The mailing address (if different): _____ (GA) 13428937
4. Date of incorporation/qualification: 6/11/2013 Document number: (FL) F13000003460
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)

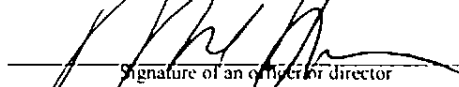
SID PUMP
4811 ~~JAYMYNLE RD~~ NW 98th Way
CORAL SPRINGS FL 30004

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

LINDA FRIEDMAN
10920 AUSTRALIAN PINE DR
P.O. Box NOT acceptable
TAMPA FL 33579

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 or authorized by the board, or the corporation has been notified in writing of the change.




Signature of an officer or director

MARK LANDON

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

7-25-17

Date

If signing on behalf of an entity:

Typed or Printed Name

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