

F14 0000002630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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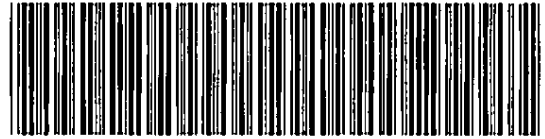
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2019 DEC 30 AM 10:56

SECRET  
TALLAHASSEE, FL 32301-0001

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JAN 29 2020

I ALBRITTON

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** AMERICAN MORTGAGE CORPORATION, INC. DBA AMERICAN MORTGAC  
Name of Corporation

**DOCUMENT NUMBER:** F14000002630

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:

Katelyn Bean

Name of Contact Person

Paracorp Incorporated

Firm/Company

2804 Gateway Oaks Dr #100

Address

Sacramento, CA 95833

City/State and Zip Code

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

For further information concerning this matter, please call:

Katelyn Bean

at (888) 280-6563  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

1. The name of the corporation: AMERICAN MORTGAGE CORPORATION, INC. DBA AMERICAN MORTGA  
2. The principal office address: 5576 Hammock Isles Drive, Naples, FL 34119

3. The mailing address (if different): \_\_\_\_\_  
4. Date of incorporation/qualification: 12/16/2014 Document number: F14000002630  
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)

RESIGNED

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

Paracorp Incorporated

155 Office Plaza Drive, 1st Floor

P.O. Box NOT acceptable

Tallahassee, FL 32301

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

Laura Aldeguer

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

12/26/2019

Date

If signing on behalf of an entity:

JODY MOUA, ASST. SECRETARY, PARACORP INCORPORATED

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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2019 DEC 30 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA