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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

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

Email Address:

REGISTERED AGENT CHANGE PHILADELPHIA MORTGAGE ADVISORS, INC.

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Estimated Charge	\$35.00

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COVER LETTER

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TO: Amendment Section Division of Corporations
PHILADELPHIA MORTGAGE ADVISORS, INC. SUBJECT: Name of Corporation
DOCUMENT NUMBER: F15000001185
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:
Joshua Murphy
Name of Contact Person
Registered Agent Solutions, Inc.
Firm/Company
Corporate Center One, 5301 Southwest Pkwy, Ste 400
Address
Austin, Texas 78735
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Joshua Murphy Name of Contact Person at (888) 705-7274 Area Code & Daytime Telephone Number
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 Taliahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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statement of	the provisions of sections 607.0502, change is submitted for a corporation order to change its registered office o	on organized	under the la	ws of the State	of Pennsylvania
		_	-		-
	of the corporation: PHILADELP				
2. The princi	ipal office address: 600 W. GERAM		SIE 2/0 PI	TIMOUTH ME	ETING, PA 19402
3. The maili	ng address (if different):				
	corporation/qualification: 3/19/20)15	_ Document	number: F15	000001185
5. The name	and street address of the current reg epartment of State: (If resigned, ente	istered agent			
	BLUMBERG EXCELSION	R CORPO	RATE SEI	RVICES INC	<u> </u>
	155 OFFICE PLAZA DR		1ST	FLOOR	21
			<u></u>	32301	—
	TALLAHASSEE,		FL	32301	
6. The name (if change	and street address of the new registe	ered agent (if	· · · · · · · · · · · · · · · · · · ·		doffice P
	and street address of the new registe	•	changed) ar		doffice PA
	and street address of the new registed):	olutions,	changed) ar Inc. Suite A	nd /or registered	doffice
	and street address of the new registed): Registered Agent So	olutions,	changed) ar Inc. Suite A	nd /or registered	doffice PA
(if change	and street address of the new registed): Registered Agent So 155 Office Plaza Dr. Tallahassee	P.O. Box NOT	Inc. Suite A	nd /or registered	
(if change The street ac as changed v	and street address of the new registed): Registered Agent Sc 155 Office Plaza Dr.	P.O. Box NOT FL ne street addr	Inc. Suite A Facceptable 3230 ress of the bits board of	od /or registered	of its registered agent,
(if change The street ac as changed of Such change authorized b	and street address of the new registed): Registered Agent Scale 155 Office Plaza Dr. Tallahassee ddress of its registered office and the will be identical. The was authorized by resolution duly by the board, or the corporation has athan G Kraus	P.O. Box NOT FL ne street address adopted by been notified	Inc. Suite A Facceptable 3230 ress of the bits board of d in writing	usiness office directors or by of the change.	of its registered agent, an officer so President
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MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)