## F16000001525

| (R                                      | equestor's Name)    |             |  |
|---|---------------------|-------------|--|
|   |                     |             |  |
| (A                                      | ddress)             | <del></del> |  |
|   |                     |             |  |
| (A                                      | ddress)             |             |  |
|   |                     |             |  |
| (C                                      | ity/State/Zip/Phone | #)          |  |
|   |                     |             |  |
| PICK-UP                                 | WAIT                | MAIL        |  |
|   |                     |             |  |
| (B                                      | usiness Entity Nam  | ne)         |  |
|   |                     |             |  |
| (D                                      | ocument Number)     |             |  |
|   |                     |             |  |
| Certified Copies Certificates of Status |                     |             |  |
|   |                     |             |  |
|   | FIL - Office        |             |  |
| Special Instructions to                 | Filing Officer:     | j           |  |
|   |                     |             |  |
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A. BUTLER AUG 1 5 2022

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

| statement of cha                                    | nge is submitted for a corporati  | , 617.0502, 607.1508, or 617.1508, Florida<br>ion organized under the laws of the State of<br>or registered agent, or both, in the State of  | Delawa                          | ire                           |                            |  |
|---|---|--|---------------------------------|-------------------------------|----------------------------|--|
|   | he corporation: HOMEXPRESS  |  | rioriaa.                        | 1                             |                            |  |
|   |   | Avenue Suite 200 Santa Ana, CA 92705   |                                 |                               |                            |  |
| 3. The mailing a                                    | ddress (if different):  |  |                                 |                               | <u> </u>                   |  |
| 4. Date of incorp                                   | . Date of incorporation/qualification: 03/31/2016 Document number: F16000001525 |  |                                 |                               |                            |  |
|   | street address of the current retment of State: (If resigned, ent               | gistered agent and registered office on file ver resigned)   | with the                        |                               |                            |  |
|   | Universal Registered Agents, Inc  | 2.   |                                 |                               |                            |  |
|   | 3458 Lakeshore Drive  |  | _                               |                               |                            |  |
|   | TALLAHASSEE, FL 32312   |  | SECI                            | 2022 /                        |                            |  |
| 6. The name and (if changed):                       | street address of the new regis   | tered agent (if changed) and /or registered o  | ffice                           | 2022 AUG 12                   | 1277                       |  |
|   | UNIVERSAL REGISTERED A  | GENTS, INC.  | <u> </u>                        | <u> </u>                      |                            |  |
|   | 1317 California Street  |  | E, FI                           | 9.                            |                            |  |
|   |   | P.O. Box NOT acceptable  | - [                             | 35                            |                            |  |
|   | Tallahassee, Florida 32304  |  | _                               |                               |                            |  |
| The street address changed will                     | ss of its registered office and t<br>be identical.                              | the street address of the business office of   | its regis                       | tered a                       | gent,                      |  |
| Such change was<br>authorized by th                 | s authorized by resolution dul-<br>e board, or the corporation has              | y adopted by its board of directors or by a<br>s been notified in writing of the change.   | n officer                       | r so                          |                            |  |
| Signatu   | e of an officer or director   | Printed or typed name and  | title                           |                               |                            |  |
| I further agree to of my duties, an document is bei | o comply with the provisions o  | agent and agree to act in this capacity.  by all statutes relative to the proper and co<br>it the obligation of my position as register<br>inge in the registered office address, I her<br>s change. | mplete j<br>ed agen<br>eby conj | perform<br>t. Or i<br>irm tha | nance<br>if this<br>it the |  |
| -16 L   |   | 8/11/2022  |                                 |                               |                            |  |
| Signature of Registered Agent                       |   | Date   |                                 |                               |                            |  |
| If signing on be                                    | half of an entity:  |  |                                 |                               |                            |  |
| TCUL  | 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, Tallahassee, FL 32314 CR2E045 (04/13)