

F210000001283

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

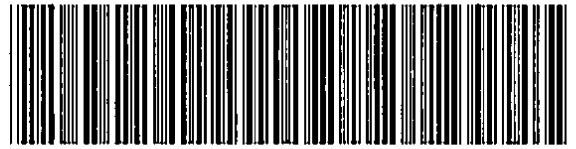
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2021 JUN 30 PM 2:19  
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JUN 30 2021  
ALBRITTON



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 14, 2021

ATTN; THOMAS WOOD  
159 N. SANGAMON #229  
CHICAGO, IL 60607

SUBJECT: NATIONAL HOME LENDING SERVICES, INC.  
Ref. Number: F21000001283

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must also contain the address of the registered agent which must be at a Florida street address.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

SASHA B PENNYWELL  
Regulatory Specialist II

Letter Number: 521A00013201

THOMAS WOOD  
(312) 815 8760

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

1. The name of the corporation: NATIONAL HOME LENDING SERVICES, INC

2. The principal office address: 159 N. SANGAMON #229 CHICAGO, IL 60607

3. The mailing address (if different):

4. Date of incorporation/qualification: DEC 17, 2020 Document number: 73084067 F51000001283

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)

RICK RICE

218 NW 24TH

MIAMI, FL 33127

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

MARCUS NORRIS

218 NW 24th

P.O. Box NOT acceptable

Miami, FL 33127

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

THOMAS WOOD /VP  
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

4/27/2021

Date

If signing on behalf of an entity:

MARCUS NORRIS

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)