

F25000001539

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

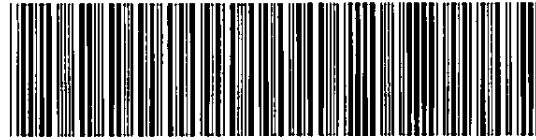
(Document Number)

Certified Copies _____

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TALLAHASSEE, FLORIDA

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FLORIDA FILING & SEARCH SERVICES, INC.

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155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395**

DATE: 04/30/2025

NAME: NATIONAL CHOICE MORTGAGE INC.

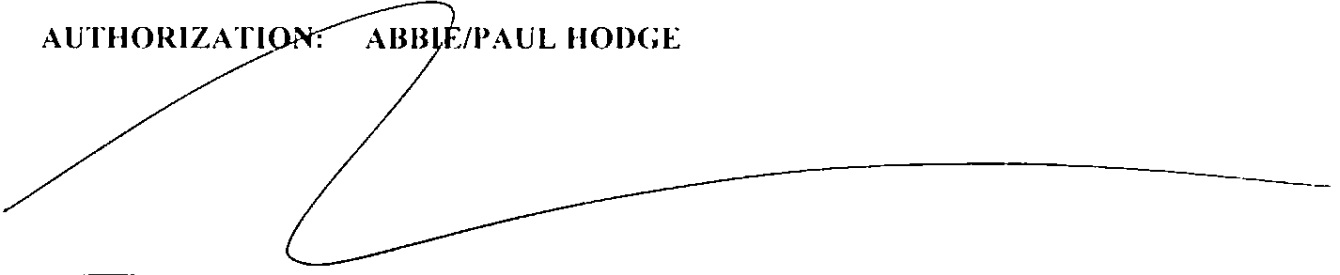
TYPE OF FILING: *Amendment*

COST: *35.00*

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE





FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 1, 2025

FLORIDA FILING & SEARCH SERVICES

SUBJECT: NATIONAL CHOICE MORTGAGE INC.
Ref. Number: F25000001539

We have received your document for NATIONAL CHOICE MORTGAGE INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The CEO is already listed. Wrong box checked?

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 325A00009376

Made change more clear- please keep original
filing date. Thank you!

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2025 MAY -9 PM 1:39
TALLAHASSEE, FLORIDA

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F25000001539

(Document number of corporation (if known))

1. NATIONAL CHOICE MORTGAGE INC.

(Name of corporation as it appears on the records of the Department of State)

2. California

(Incorporated under laws of)

3. 3/17/2025

(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____

5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) _____

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO	Sasha Esfahanian	4695 MacArthur Ct. ste 1100	☒ Add
		Newport Beach, CA 92660	☐ Remove
CEO	SASHA ESFAHANIAN	3695 MACARTHUR CT STE 1100	☐ Add
		NEWPORT BEACH, CA 92660	☒ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

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10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Sasha Esfahanian

Signature ID: XCX1FV0144

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Sasha Esfahanian

(Typed or printed name of person signing)

CEO

(Title of person signing)

FILING FEE \$35.00