F9800003417

(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
T PICK-UP	☐ WAIT	☐ MAIL
<u> </u>		_
(D.	ninona Entity No-	
(Bu	siness Entity Nan	ne)
. (De		
(DC	cument Number)	
Cartified Capies	Cortificates	of Status
Certified Copies	_ Certificates	or Status
		· · · · · · · · · · · · · · · · · · ·
Special Instructions to Filing Officer:		
	•	

a





400106562434

07/30/07--01014--034 **35.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS

PS 8/3/07

C.M.A. MORTGAGE, INC.

212 J. H. WALKER DR., P.O. BOX 344, PENDLETON, IN 46064-0344 TELEPHONE 765-778-8541 TOLL FREE 1-800-557-1513 FAX 765-778-2451

July 25, 2007

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sirs,

Please note our change of Resident Agent. Thank you.

Sincerely yours

Wesley D. Schrock General Counsel

Direct Dial # 765-724-2161

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: C.M.Q. MOrtgage, I.X. (Name of Corporation)
DOCUMENT NUMBER: F98 DODDO 3417
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:
Sandy Den Shorn (Name of Contact Person)
C.M.a. Mortgage, INC. (Firm/Company)
212 JH Walker Dr. (Address)
Pendleton, IN 46064 (City/State and Zip Code)
For further information concerning this matter, please call:
Sandy DenStorn at (765) 778-8541 (Name of Contact Person) at (765) 778-8541 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section
Amendment Section Amendment Section Division of Corporations — Division of
P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

TO:

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 LUDANA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: C.M.A. MOY+GAGE INC.
2. The principal office address: 212 JH Walker Dr., Pendleton, 14 46064
3. The mailing address (if different): Po Box 344 Pendleton, IN 46064
4. Date of incorporation/qualification: 06/16/1998 Document number: F9800003417
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
CT Corporation System
1200 S. Pine Island Rd.
PLANTATION, FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): In Corp Services, Jac.
(if changed): In Corp Services, Jac. 17888 67th Court North (P.O. Box NOT acceptable)
Loxahatchee, Fl 33470 399
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.
Jest Martin Vice President Secretary (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.
WHAT WALL OF Behalf of Incept 07/12/07 (Signature of Registered Agent) Survices (Date)
If signing on behalf of an entity:
risten Hudak - Incorp Services

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *