

F99000000985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

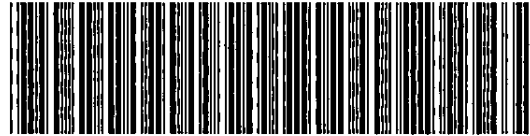
(Document Number)

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APPROVED  
AND  
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14 MAY -5 AM 11:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS  
MAY 14 2014  
EXAMINER

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dollars + Sense Mortgage, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** \_\_\_\_\_

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:

Jay Gelb

Name of Contact Person

Dollars + Sense Mortgage, Inc.

Firm/Company

180 Office Park Way, Suite 2000

Address

Pittsford, NY 14534

City/State and Zip Code

Jgelb@rhemortgage.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jay Gelb

Name of Contact Person

at

585 262-3200

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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

1. The name of the corporation: Dollars + Sense Mortgage, Inc.
2. The principal office address: 180 Office Park Way, Suite 200, Pittsford NY 14534
3. The mailing address (if different): Same
4. Date of incorporation/qualification: \_\_\_\_\_ Document number: F99000000985

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)

GY CORPORATE SERVICES, INC.  
450 E. Las Olas Boulevard #1400  
Ft. Lauderdale, Florida 33301

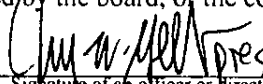
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Myrl S. Gelb  
1323 RIVER CLUB DRIVE  
P.O. Box NOT acceptable  
VERO BEACH, FLORIDA 32963

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AND  
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TALLAHASSEE, FLORIDA

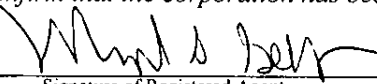
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Jay W. Gelb President  
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

4/30/2014  
Date

If signing on behalf of an entity:

MYRL S. GELB  
Typed or Printed Name

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