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TΩ:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:				

LLC REGISTERED AGENT CHANGE MORTGAGE FUNDING DIRECT VENTURES, LLC

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K. SALY

JAN 18 2022

INHS18 (2/14)

COVER LETTER

TO:	Division of Corporations						
SUBJE	MORTGAGE FUNDING DIRECT VENTURES, LLC						
AUDJE	Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.					
Please	return all correspondence concerning this	matter to the following:					
Ma	m. Cootillo						
IVIA	ry Castillo						
	Name of Person						
Regis	stered Agent Solutions, Inc.						
	Firm/Company						
Corp	orate Center One, 5301 Southwest	Pkwy, Ste 400					
	Address						
Austi	in, TX 78735						
	City/State and Zip Code						
		<u></u>					
i	E-mail address: (to be used for future annu	al report notification)					
For fu	orther information concerning this matter, p	olease call:					
Mary Castillo 888 705-7274							
	Name of Person	Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS:	MAILING ADDRESS: Registration Section					
Registration Section Division of Corporations Clifton Building		Division of Corporations P.O. Box 6327					
						2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amount:							
	S25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Na	ame of the limited liability company: MORTGA	GE FUNDING	DIRECT VENTURES,		
2. (a)	495 NORTH KELLER ROAD	(b) 495 NORTH KELLER ROAD			
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	SUITE 550	SUITE 550			
	MAITLAND, FL 32751	MAITLAND, FL 32751			
	11/30/2000	L00000	0014814		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	NRAI SERVICES, INC				
J. (a)	Registered Agent and Registered Office shown on the records o	f the Florida Dept, of Stat	e:		
	1200 SOUTH PINE ISLAND RO	AD			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	1 2		
			182 A		
	PLANTATION	_L 33324	TALLAHASSI		
(b)	Registered Agent Solutions, Inc.		ASSEE, FI		
(0)	Enter name of NEW Registered Agent and/or NEW Registere	d OMce address:	Filo		
	155 Office Plaza Dr.		7. O6		
	NEW Registered Office Address:		-		
	Suite A		-		
	Tallahassee	ւ 32301	_		
the ch agent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the registered offic liability company, it i of the limited liabilit	e and the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in		
s/ J	aclyn Wright	Jaclyn Wrigh	nt Assistant Secretary		
-	ature of a member or authorized representative of a member		Printed or typed name of signee		
I here provise the obtomer notifical	the accept the appointment as registered agent and a sions of all statutes relative to the proper and completed digations of my position as registered agent as provided with reflect a change in the registered office address, and in writing of this change. Mackenzie Hart, Asst Secretary	gree to act in this cap le performance of my led for in Chapter 60. I hereby confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been		
Signat	ure of Registered Agent				