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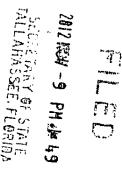
(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Resolution Portfolio Management & Servicing, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ben Henschel

Name of Person

Resolution Portfolio Management & Oversight, LLC

Firm/Company

321 East Hillsboro Blvd.

Address

Deerfield Beach, FL 33441

City/State and Zip Code

pmonson@rpmoversight.com

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

For further information concerning this matter, please call:

Pat Monson

at (800

661-4776

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

■ \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

INHS18 (5/08)

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

1.	Nar	me of the limited liability company: Resolution Portfolio N	Management & Servicing, LLC			
2.	(a)	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny: 321 East Hillsboro Blvd., Deerfield Be	each, FL 33441		
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	321 East Hillsboro Blvd., Deerfield Be	nach, FL 33441		
5/7	/08		L08000045718			
3.	Dat	e of filing/registration in Florida	4. Document number			
5.	(a)	Registered Agent and Registered Office shown or	the records of the Florida	Dept. of St	ate:	
		Registered Agent:	Robert G. Bello, Esq.	<u> </u>	· ~>	#thy:
		Registered Office Address:	800 Fairway Drive, Suite 100	25 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	Mark No.
			Deerfield Beach, FL 33441	En -C	<u> </u>	<u> </u>
				, E	3	<u> </u>
	(b)	Enter name of NEW Registered Agent and/or NI	EW Registered Office add	ress 🚍	1	,
	()	NEW Registered Agent:		1 000	Λο 1⊾	
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	321 East Hillsboro Blvd.			
			Deerfield Beach	,FL_33	3441	
and lia the the	nfirr d the bilit e me e ope	imited liability company is not organized under the ned that after the change or changes are made, the business office of the registered agent will be iderly company, it is hereby confirmed that the change mbers of the limited liability company or as otherwerating agreement of the limited liability company.	Florida street address of the	registered Florida limi	office	
O I g		- 5. 2 homost of authorized representative of a member				
_	Hens	chel or typed name of signee	_			
		-	armee to not in this comment	u I familia	w 00400	, fo
cor an Ch ad	nere mply d'I a lapte dres	by accept the appointment as registered agent and with the provisions of all statules relative to the pum familiar with and accept the obligations of my per 608, F.S. Or, if this document is being filed to me, I hereby confirm that the limited liability compa	agree to act in this capacti roper and complete perforh osition as registered agent terely reflect a change in th ny has been notified in writ	y. I juriner nance of m as provide e registere ing of this	ugree y dutie d for in d office change	10 S, 7 2

Signature of Registered Agent