Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone Fax Number

: (561)694-8107 : (561)694-1639

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## LLC REGISTERED AGENT CHANGE J.I. KISLAK MORTGAGE LLC

Certificate of Status	0
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H13000169290

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

1. The name of the limited liability company is:	ISLAK MORTGAGE LLC	
2. (a) Principal office address of the limited liability comapny:	7900 MIAMI LAKES DRIVE WEST	
(Note: MUST BE STREET ADDRESS)	MIAMI LAKES FL 33016	
(b) Mailing address of limited liability company:	7900 MIAMI LAKES DRIVE WES	Τ
(Note: MAY BE POST OFFICE BOX)	MIAMI LAKES FL 33016	
6/30/2009	L10000050006	Z. 2
3. Date of filing/registration in Florida	4. Document number	
5.(a) Registered Agent and Registered Office shown of	on the records of the Florida Dept	. of State □
Registered Agent:	COMPLO, CHRISTY	in the second
Registered Office Address:	7900 MIAMI LAKES DRIVE WE	
•	MIAMI LAKES FL 33016	
(b) Enter name of NEW Registered Agent and/or NEW R	egistered Office address:	735
NEW Registered Agent:	Corporate Creations Network Inc.	
NEW Registered Office Address:	11380 Prosperity Farms Road #221E	
(MUST BE FLORIDA STREET ADDRESS)	Palm Beach Gardens FL 3	3410
If the limited liability company is not organized under the laws or changes are made, the Florida street address of the registered identical. Or, in the case of a Florida limited liability company, an affirmative vote of the members of the limited liability company, the operating agreement of the limited liability company.  (Signature of a member or authorized representative of a member)	office and the business office of the regit is hereby confirmed that the change(s	istered agent will be a was/were authorized by
by Jessica Morales as attorney-in-fact (Printed or Typed name of signee)  I hereby accept the appointment as registered agent and agree of all statutes relative to the proper and complete performance my position as registered agent as provided for in Chapter 608, in maregistered office address, I hereby confirm that the limited	of my duties, and I am familiar with and FS. Or, if this document is being filed d liability company has been notified in t	l accept the obligations of to merely reflect a change
(Signature of Registered Agent) Division of Corporations, P.O. B	Acrales, Special Secretary lox 6327, Tallahassee, FL 32314	L
INHS18(10/99)	The same of the sa	
Corporate Creations International Inc.		· .
11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107		