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EXAMINER

COVER LETTER

TO: Registration Section

Division of Corporations



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:

Tamara Peterson

Name of Person

Florida Servicing Company.com,LLC1

Firm/Company

19000 SW 54 Place

Address

Southwest Ranches, FI 33331

City/State and Zip Code

tspeterson@mail.com

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

For further information concerning this matter, please call:

Tamara Peterson

...954

553-1833

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR 'BOTH 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. Name of the limited liability company: Florda Servicing Comp	any.Com,LLC	· · · · · · · · · · · · · · · · · · ·
2. (a) Principal office address of limited liability company	v* 19000 SW 54 Place	THE CO
(Note: MUST BE STREET ADDRESS)	Southwest Ranches, Florida 33332	五 五 五
		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
(b) Mailing address of limited liability company:	P.O. Box 327761	Ser 7 m
(Note: MAY BE POST OFFICE BOX)	Ft. Lauderdale, Fl 33332	<u> </u>
,		
3/2011	L1100003	334/7
3. Date of filing/registration in Florida	4. Document number	-, ,
5. (a) Registered Agent and Registered Office shown on		Dept. of State:
Registered Agent:	Tamara Peterson	
Registered Office Address:	19000 Sw 54 place	
	Southwest Ranches. Fl 33332	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW Registered Agent</u> :	W Registered Office add	ress:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	19000 SW 54 Place	
MUST BE I LURIDA STREET ADDRESS	Southwest Ranches	FL 33332
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherwised the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	lorida street address of the	registered office
Tamara Peterson		
Printed or typed name of signee	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, thereby confirm that the limited liability company	ngree to act in this capacit oper and complete perfori osition as registered agent erely reflect a change in th y has been notified in writ	y. I further agree to mance of my duties, as provided for in he registered office ting of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Registered Agent