## L12000 140233

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

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SECRETARY OF STATE
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D. BRUCE AUG 15 2020

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 15 Mondage Le Name of Limi	ted Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to	o the following:
Thomas W Mantiev' Name of Person	
US Mortgage Lendens C Firm/Company	cc please update
3440 Hollywood Blud 4/6	registed Agent registed Agent Mailing & Agent Nome & Address  Hund Fore
Hollywood, FL 3302/ City/State and Zip Code	- Noire & Addiness
E-mail address: (to be used for future annual report	notification)
For further information concerning this matter, please ca	ni
An Har Tom Martina (	154, 667-9110 EE E
Thoms Name of Person Him	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations The Control of Tollahagae
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
Tarianassee, T.C. 52514	Tallahassee, FL 32303
Enclosed is a check for the following amount:	
\$25 Filing Fee	S55 Filing Fee & Certified Copy
INHS18 (2/14)	

## 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.

1. Na	ume of the limited liability company: US Morte age Could	ng CCC
	3440 Hollywood Blud Sute 415 (b) 3440	
	(Note: MUST BE STREET ADDRESS)	(Note: MAY BE POST OFFICE BOX)
		<del></del>
	11/02/2012	2000/40233
3.	Date of filing/registration in Florida 4.	Document number
5. (a)	Thomas W Martin	-
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State	e:
	3440 Hollywood Blud Set 415	-
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
		- -
	Hollywood FL 3302/	1020 JUH 29 SECKETAR
	Thomas W Montin	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:	29
	3440 Hollywood Blind Suite 415 NEW Registered Office Address:	AND: LA
	Hollywood, FL 33021	_
	,	
	, FL	_
If the	limited liability company is not organized under the laws of the State of Flo e or changes are made, the Florida street address of the registered office an	orida, it is hereby confirmed that after the d the business office of the registered
agent	will be identical. Or, in the case of a Florida limited liability company, it is ere authorized by an affirmative vote of the members of the limited liability	s hereby confirmed that the change(s)
the art	icles of organization or the operating agreement of the limited liability con	npany.
	Tank Tho	Printed or typed name of signee
11	the second of a member of action of action and action and action this can	acity. I further garee to comply with the
provis	ions of all statutes relative to the proper and complete performance of my ligations of my position as registered agent as provided for in Chapter 605 rely reflect a change in the registered office address, I hereby confirm that	duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed
to mei	rely reflect a change in the registered office address, I hereby confirm that of inferiting of this change.	the limited liability company has been
6	/ust	
Signat	use of Registered Agent	