Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (650) 617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323) 962-8600 Fax Number : (323)962-3889

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LOAN FILE INTELLIGENT REVIEW SYSTEMS, LLC

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COVER LETTER

| Division of Corporations | | | | | | |
|--|---|--------------------------------------|--|--|--|--|
| SUBJECT: LOAN FILE INTELLIGENT R | EVIEW SYST | EMS, LLC | | | | |
| | of Limited Liab | pility Company | | | | |
| Dear Sir or Madam: | | | | | | |
| The enclosed Registered Agent/Registered Office | e Change and fe | e(s) are submitted for filing. | | | | |
| Please return all correspondence concerning this | matter to the fo | llowing: | | | | |
| Cheyenne Moseley | | | | | | |
| Name of Person | | - | | | | |
| Legalzoom.com, Inc. | | | | | | |
| Firm√Company | | - | | | | |
| 101 N. Brand Blvd., 10th Floor | | | | | | |
| Address | | - | | | | |
| Glendale, CA 91203 | | | | | | |
| City/State and Zip Code | <u></u> | | | | | |
| etwinslow@gmail.com | | | | | | |
| E-mail address: (to be used for future annu | nal report notifica | action) | | | | |
| For further information concerning this matter, p | please call: | | | | | |
| Imelda Vasquez | 323 | 962-8600 x7950 | | | | |
| 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 | | | | |
| IN1IS18 (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 | ame of the limited liability company: LOAN FILE II | NTELLI | GENT REV | TEW SYSTEMS, LLC | |
|------------------|--|--|--|--|--|--|
| | | | | | | |
| | • • | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | | |
| | | 900 JOHNSON DRIVE | 900 JOHNSON DRIVE | | | |
| | | CLERMONT, FL 34711 | | | | |
| | | 08/19/2015 | | L15000141 | 87Q | |
| 3. | | Date of filing/registration in Florida JOHN HOLLOWAY | | | ocument number | |
| 5. | (a) | Registered Agent and Registered Office shown on the records of | dhu 171 ushda | 1 Nove 1 1 2 CO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| | | | | • | | |
| | | 725 NORTHLAKE BLVD. 12 Registered Office Address (MUST BE FLORIDA STREET) | | 701 (SAN 2) | | |
| | | ALTAMONTE SPRINGS , FL | 32701 | | THE APR 27 | |
| | (b) Enter name of NEW Registered Agent and/or NEW Registered O | | | | | |
| | | | | ress: | STATE OR | |
| | | United States Corporation Agents, Inc. | | | 26 TE | |
| | | NEW Registered Office Address: | | | | |
| | | 13302 Winding Oak Court Suite A | | | | |
| | | Tampa, FL | | | | |
| the age wa | e cha ent v s/we | imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the | the regisability con the limit limited li | tered office a upany, it is h ted liability c ability compa | nd the business office of the registered ereby confirmed that the change(s) company or as otherwise provided in any. | |
| | | a de la companya della companya della companya de la companya della companya dell | Edw | ard Winslo | w | |
| 5 | lighai | ure of a member or authorized representative of a member | | Р | rinted or typed name of signee | |
| pro the to | ovisi obl ngre | by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete lyations of my position as registered agent as provided by reflect a change in the registered office address, I I | ee to act performa d for in C hereby co | in this capact nce of my du hapter 605, F ufirm that the | Iv. I further agree to comply with the ties, and I am familiar with and accept E.S. Or, if this document is being filed a limited liability company has been | |
| nO: | ·i/rec | | no Moseley tion Agents | | etary on behalf of United States | |
| Sig | gnatu | re of Registered Agent | | | | |