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1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 170804 7644314

AUTHORIZATION Spellete

COST LIMIT :

ORDER DATE: October 27, 2021

ORDER TIME : 2:56 PM

ORDER NO. : 170804-057

CUSTOMER NO: 7644314

CHANGE OF AGENT

NAME: GREENWAY LOAN MANAGEMENT, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

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	me of the limited liability company: GREENWAY I	_OAN MA	N.	AGEMENT	LLC		
	(a)					*****		
	(4).	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		.,	M	lailing address of limited lia (Note: MAY BE POST OF	hility comp	oany:
		9001 EAST COLONIAL DRIVE			9001 EAS	01 EAST COLONIAL DRIVE		
		ORLANDO, FL 32817		ORLANDO, FL 32817				
		03/04/2016		Į	.16000044	677		
3.		Date of filing/registration in Florida	4.	_	I,	Document number		
5.	(a)							
	(4)	Registered Agent and Registered Office shown on the records of LOWMAN, JR., WILLIAM R., ESQ, SHUFFIELD, LOW						
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
		1000 LEGION PLACE, SUITE 1700						
		ORLANDO	32801					
		ORLANDO, F	L				2021	
	(b)					•	2021 GCT	•
		Enter name of NEW Registered Agent and/or NEW Registere	d Office ad	dr	ess:		F 29	, n
		Corporation Service Company					<u> </u>	<u>-</u> j
		NEW Registered Office Address:					5 9:	
		1201 Hays Street						
		Tallahassee	22204					
		Talianassee, Fi	L <u>32301</u>					
cha age was	nge nt w s/we artic	mited liability company is not organized under the la or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited li re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	registere ability co of the lim	ed m tite	office and pany, it is l ed liability	the business office of the hereby confirmed that the company or as otherwi	he regist he chang	ered ge(s)
				Jill Cilmi, Authorized Person				
S	ignati	ire of a member or authorized representative of a member			I	Printed or typed name of sig	nee	
pro the to n not	visio obli nere ified	y accept the appointment as registered agent and agons of all statutes relative to the proper and complete gations of my position as registered agent as provide ly reflect a change in the registered office address, I in writing of this change.	ree to act performed for in C hereby co	ir an h m	this capac ce of my di apter 605, firm that th	city. I further agree to outes, and I am familiar F.S. Or, if this docume to limited liability comp	comply v with and ont is being pany has	vith the l accept ng filed been
Signature of Registered Agent Grace					Kirby, Ass	t. Vice President		