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## COVER LETTER &

INHS18 (2/14)

то:	Registration Section Division of Corporations	•	
SUBJE	Cast Home Loans, LLC		
	Nan	me of Limited Liability Company	
Dear Si	r or Madam:		
The enc	closed Registered Agent/Registered Off	ffice Change and fee(s) are submitted for filing.	_
Please r	eturn all correspondence concerning th	his matter to the following:	を見る
Richar	rd Kozell, Esq.		100 A SOE
	Name of Person		T
Rick K	ozell PLLC		ORIDI ORIDI
	Firm/Company	<del></del>	, <b>J.</b> 18
616 SI	E Dixie Hwy		
	Address		
Stuart,	, FI 34994		
	City/State and Zip Code		
rick@k	kozell-law.com		
E-	mail address: (to be used for future ann	nual report notification)	
For furt	her information concerning this matter,	r, please call:	
Cindy	Devereaux	772 2873100	
	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	g amount:	
	<b>☑</b> \$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 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.

a)	4500 PGA Blvd Suite 301A	ſi	b) '	4500 P	GA Blvd. Suite 301A	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				failing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
	Palm Beach County, FL 33418		Ε	Dalm Da	each County, FI 33418	
	- Lam Bouch County, 1 E co 110	_	_	aiiii be	each County, F1 33416	
	10/04/2017		_ L1	700020	04947	
	Date of filing/registration in Florida	4.			Document number	
a)	Richard Kozell Esq.					
	Registered Agent and Registered Office shown on the records of the	ne Florida	a De	ept. of State	- ic: 過一論	
	Registered Office Address (MUST BE FLORIDA STREET A.	<u>DDRESS</u>	<u>s)</u>			
	12000 SE Dixie Highway					
	Hobe Sound , FL	33455			TANASSEE P	
ı) _	Richard S. Kozell Esq.				CORIDI	
	Enter name of NEW Registered Agent and/or NEW Registered C	)ffice add	dre	77:	- F	
	Rick Kozell PLLC					
	NEW Registered Office Address:				-	
	616 SE Dixie Hwy					
	Stuart pp. 3	34994				
ian Wi ver	nited liability company is not organized under the laws age or changes are made, the Florida street address of t ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of des of organization or the opporting agreement of the li	he regis vility co the lim mited l	ster mp iteo iab	ed office pany, it is d liability	e and the business office of the registe s hereby confirmed that the change(s) y company or as otherwise provided i	
alu	are of a member or authorized representative of a member				Printed or typed name of signee	
sio. blig rel	y accept the appointment is registered agent and agree ns of all statutes relative to the proper and complete p gations of my position as registered agent as provided y reflect a change in the registered office address. The mywyting of this change	e to act erforma for in C reby co	in anc ha mfi	this cape to of my o pter 605, rm that t	acity. I further agree to comply with duties, and I am familiar with and acc i. F.S. Or, if this document is being fi the limited liability company has been	

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

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