1190000 85498

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	-

Office Use Only



200333496612

09/09/19--01031--027 **25.00

2019 SEX ~ 9 PH 3: 29

ED . 7 . . 3

COVER LETTER

TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations		,				
SUBJ	Anders Mortgage, LLC						
	Name	Name of Limited Liability Company					
Dear S	Sir or Madam:						
The er	nclosed Registered Agent/Registered Offic	e Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning this	matter to the	following:				
Rona	ald Rau						
	Name of Person						
	Firm/Company						
4146	Hensley Circle						
	Address						
EI Do	orado Hills, CA 95762						
	City/State and Zip Code						
rrau@	@anderscapgroup.com						
	E-mail address: (to be used for future annu	al report notif	ication)				
For fu	rther information concerning this matter, p	lease call:					
Rona	ld Rau	916 _ at (761-6861)				
	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	Rej Div P.C	gistration Section vision of Corporations D. Box 6327 Hahassee, Florida 32314				
	Enclosed is a check for the following a	mount:					
	☑ \$25 Filing Fee	- \$5	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.

1. Na	ame of the limited liability company: Anders Mortg	age				
2. (a)	1540 Kurt Street	 (1	1540 Ku	rt Street		
- . (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	``	· —	Mailing address of limited (Note: MAY BE POS)		
	Eustis, FL 32726	_	Eustis, F	L 32726		
	March 27, 2019			35498		<u></u>
3. 5. (a)	Date of filing/registration in Florida Kevin Earnest	4.		Document number		
<i>).</i> (u)	Registered Agent and Registered Office shown on the records of t	the Florid	a Dept. of State	::		
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRES.	<u>S)</u>			
	Eustis	32726				
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ad	ldress:		2019 577 -9	•
	NEW Registered Office Address:				R	
	1611 Summerland				3: 34	مراجعة
	Winter Park	32789			•	
the cha agent v was/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cley of organization or the operating agreement of the	the regi ability co of the lin limited	stered office ompany, it is nited liability	and the business of shereby confirmed to y company or as other	fice of th hat the c	ne registered hange(s)
Signat	ture of a member or authorized representative of a member		naiu Kau	Printed or typed name of	of signee	
I herei provisi the obl to merc	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have been also been as the change.	ee to ac perform d for in hereby c	t in this cape ance of my o Chapter 605 confirm that i	acity. I further agreduties, and I am fam, F.S. Or, if this doc the limited liability o	e to com iliar with cument is company	ply with the h and accept being filed has been

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

Signature of Registered Agent