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To: Division of Corporations Fax Number : (850)617-6383 Account Name : REGISTERED AGENTS INC. Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206 Enter the email address for this business entity to be used for future Tangual report mailings. Enter only one email address please.** Email Address:______

LLC REGISTERED AGENT CHANGE THEMIS MORTGAGE LLC

Certificate of Status	0	
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M. SOLOMON

SEP-1-7 2024

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.

Na	nne of the limited liability company: I hemi	is Mortg	age LLC		
	7901 4th St N		_(b) 7901 4th St N		
	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y:	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)		
	STE 300		STE 300		
	St. Petersburg, FL 33702		St. Petersbur	g, FL 33702	
	12/12/23		L2300054	18389	
	Date of filing/registration in Florida	4.	Docu	iment number	
(a)	PERRY, CHRISTOPHER				
(b) <u> </u>	Registered Agent and Registered Office shown on the reco	rds of the Florida	a Dept. of State:		
	100 EAST PINE STREET				
	Registered Office Address (MUST BE FLORIDA STR	EET ADDRESS	<u> </u>	S 28	
	SUITE #110			Z4S	
	ORLANDO	_{. FL} 32801	1	ROZI SEP 17 SECKETARY	
	Registered Agents Inc			ILED PHP: 06 AHASSEE, FL	
	Enter name of NEW Registered Agent and/or NEW Regis	stered Office ad	dress:		
	7901 4th St N			06	
	NEW Registered Office Address:				
	STE 300				
	St. Petersburg	, _{FL} 33702	2		

the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Robin Jones Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

David Roberts - Assistant Secretary

Signature of Registered Agent