MUI 000001889

(Requestor's Name)			
(Address)			
(Ad	dress)		
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Do	cument Number)		
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
	<u> </u>		

Office Use Only



500286685855

08/14/16--01058--001 **25.00

16 JUN 14 AM II: 33

Fee.

JUN 1 6 2016

S. YOUNG

COVER LETTER

Division of Corporations		
SUBJECT: Radian Services LLC	С	
	n Limited Liability Company	
Dear Sir or Madam:		
The enclosed application, certificate and fee(s) ar	are submitted for filing.	
Please return all correspondence concerning this i	s matter to the following:	
Tami A. Bohm		
Name of Person		
Radian		
Firm/Company		
1601 Market St.		36
Address		
Philadelphia, PA 19103		16 JUNIU AMII: 32
City/State and Zip Code		AMI
Penny.badger@radian.biz		: 32
E-mail address: (to be used for future annual re		
For further information concerning this matter, pl	nlesse call·	
Tami Bohm	at (215) 231-1335	
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: \$\begin{align*}	: \$55 Filing Fee & \$60 Filing Fee, Certified Copy Certificate of Status & Certified Copy	اع'

CR2E055 (9/15)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	on the records of the Florida D	epartment of	
State: Radian Services LLC			
Enter new principal office address, if applicable:			
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
2. The Florida document number of this limited liab	bility company is: M01000	ラ 001889 第	
3. Jurisdiction of its organization: Delaware		<u>ه</u> ن	
4. Date authorized to do business in Florida: 08/	16/2001		
SECTION II (5-9 complete only the applicable c	hanges)		ري: د:
5. New name of the limited liability company: Ramust	adian Clayton Services contain "Limited Liability Cor	s LLC npany, ""L.L.C.," or "LLC."))
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C 6. If amending the registered agent and/or registered registered agent and/or the new registered office ad	aging members adopting the al ." or "LLC.") d officer address on our records	ternate name. The alternate nai	ı me
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida	a Street Address	
	City	, Florida Zip Code	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agen the provisions of all statutes relative to the proper a and accept the obligations of my position as registe document is being filed to merely reflect a change i liability company has been notified in writing of thi	it and agree to act in this capac and complete performance of n ered agent as provided for in C in the registered office address,	ny duties, and I am familiar wit hapter 605. F.S. Or. if this	th

	hanges person, title or capacity in accord		
tle/ Capacity	<u>Name</u>	Address	Type of Action
			Add
	-		Remove
			Add
	-		Remove
			75 ——□Add
	-		Remove.
		-	جــــ ^ Add
	-		Remove
			Add
	-		Remove
aforementioned am	icate, if required: no more than 90 days tendment(s), duly authenticated by the he law of which this entity is organized	official having custody of records	in the

Filing Fee: \$25.00

<u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF "RADIAN SERVICES LLC",
CHANGING ITS NAME FROM "RADIAN SERVICES LLC" TO "RADIAN CLAYTON
SERVICES LLC", FILED IN THIS OFFICE ON THE SECOND DAY OF MAY,
A.D. 2016, AT 4:35 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF
THE AFORESAID CERTIFICATE OF AMENDMENT IS THE FIRST DAY OF
JULY, A.D. 2016.

16 III II MII: 32

Authentication: 202254757

Date: 05-03-16

3235245 8100 SR# 20162739172

State of Delaware
Secretary of State
Division of Corporations
Delivered 04:35 PM 05/02/2016
FILED 04:35 PM 05/02/2016
SR 20162739172 - File Number 3235245

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

	Name of Limit	ed Liability Compa vices LLC	ny:		<u> </u>
2.	The Certificate as follows:	of Formation of the	e limited liabi	lity company is	hereby amended
		fective July ability compa			
	IN WITNESS the 2nd	WHEREOF, the ui	_		Certificate on
			ву: Јап	i G. K	Ohm
				Authorized Po	erson(s)

Print or Type