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### **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: Radian Cla	yton Serv			im:
	came of roleigh	r.mined i,iaoi	nty Compa	my
Dear Sir or Madam:				
The enclosed application, certific	rate and fee(s) ar	re submitted fe	or filing.	
Please return all correspondence	concerning this	matter to the f	ollowing:	
Angela Stan				
Name of	Person			
Radian				
Firm/Cor	npany			
1500 Market Street	t, Suite 20	50W		
Addr	ess	-		
Philadelphia, PA 19	9102			
	e and Zip Code			
regulatory@radian.	com			
E-mail address: (to be used for		eport notificat	ion)	
For further information concerni.	ng this matter, p			
Angela Stan	:	<sub>at (</sub> 215	, <u>231-1</u>	
Name of Person		Area Code	& Daytime	Telephone Number
STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, Florida 3230	irele		Registra Division P.O. Bo:	NG ADDRESS: tion Section of Corporations x 6327 see, Florida 32314
	owing amount: iling Fee & cate of Status	S55 Filin Certified	_	S60 Filing Fee. Certificate of Status & Certified Copy

CR2E055 (9/15)

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FIL 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	s on the records of the Florida Department of	
State: Radian Clayton Services LL	.C	
Enter new principal office address, if applicable:	1500 Market Street, Suite 2050	)W
( <u>Principal office address</u> MUST BE A STREET ADDRESS)	Philadelphia, PA 19102	
Enter new mailing address, if applicable: ( <u>Mailing address</u> <u>MAY BE A POST OFFICE BOS</u> )	N/A	19 OCT -
2. The Florida document number of this limited lia	bility company is: M01000001889	
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: 08/	16/2001	<b>₩</b>
5. New name of the limited liability company: R (must  (If name unavailable, enter alternate name adopted copy of the written consent of the managers or mar must contain "Limited Liability Company." "L.L.C	for the purpose of transacting business in Flor naging members adopting the alternate name. T	ida and attach a
6. If amending the registered agent and/or registere registered agent and/or the new registered office ad		e of the new
Name of New Registered Agent: N/A	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address: N/A		
	Enter Florida Street Addres.	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registeredy accept the appointment as registered agenthe provisions of all statutes relative to the proper dand accept the obligations of my position as registed document is being filed to merely reflect a change is liability company has been notified in writing of the	gistered Agent: at and agree to act in this capacity. I further ag and complete performance of my duties, and I ered agent as provided for in Chapter 605, F.S. in the registered office address, I hereby confit	rree to comply with am familiar with . Or, if this

itle/ Capacity	<u>Name</u>	Address	Type of Act
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ramı A. Bonm, Manager

Typed or printed name of signee

Filing Fee: \$25.00



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 CLAYTON
SERVICES LLC", CHANGING ITS NAME FROM "RADIAN CLAYTON SERVICES
LLC" TO "RADIAN LENDER SERVICES LLC", FILED IN THIS OFFICE ON
THE TWELFTH DAY OF SEPTEMBER, A.D. 2019, AT 3:45 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 OCTOBER, A.D. 2019.



Authentication: 203640208

Date: 09-20-19

### STATE OF DELAWARE CERTIFICATE OF AMENDMENT

First: The name of the limited liability company Radian Lender Services LLC.  The effective date of this filing is October 1,  IN WITNESS WHEREOF, the undersigned have executed this Certificate		Radian	Clayton	Services
Radian Lender Services LLC.  The effective date of this filing is October 1,  IN WITNESS WHEREOF, the undersigned have executed this Certificate	The Certificate of Formation of the last follows:	limited liabili	ity company	is hereby am
IN WITNESS WHEREOF, the undersigned have executed this Certificate			iability	company
IN WITNESS WHEREOF, the undersigned have executed this Certificate	The effective date of th	nis filir	ng is Oc	tober 1,
	IN WITNESS WHEREOF A			
By: Janni Q Bohn	the 12th day of	Septemb	oer	. A.D. <u>2019</u>
By: Janua Pohic Authorized Person(s)	the 12th day of	Septemb	n Q	Bohn
By: Jami A. Bohm, Manager	the <u>12th</u> day of	Septemb y: MM	Authorized	A.D. 2019  Bohy  Person(s)



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'RADIAN CLAYTON SERVICES LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'RADIAN LENDER SERVICES LLC' ON THE TWELFTH DAY OF SEPTEMBER, A.D. 2019, AT 3:45 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 OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED

LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT

HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS

OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RADIAN CLAYTON SERVICES LLC" WAS FORMED ON THE TENTH DAY OF MAY, A.D. 2001.



Authentication: 203658626

Date: 09-24-19