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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (514)280-3338 Fax Number : (954)208-0845

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MORTGAGE LENDERS OF AMERICA, L.L.C.

Certificate of Status	0
Certified Copy	1
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Electronic Filing Menu Corporate Filing Menu

Help

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

This change will he	(1-4 must be completed) ave the effective date of 4/02/2019
1. Name of limited liability Company as it appears	s on the records of the Florida Department of
State: Mortgage Lenders of America, L.L.C.	
Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	7.0.0
Enter new mailing address, if applicable:	产品 表 了
(Mailing address MAY BE A POST OFFICE BON)	2 7
2. The Florida document number of this limited lia	ability company is: M03000001250
Jurisdiction of its organization: Kansas	Born of
4. Date authorized to do business in Florida: 4/2	1/2003
SECTION II (5-9 complete only the applicable	changes)
5. New name of the limited liability company: 2	Cillow Home Leans, LLC st contain "Limited Liability Company," "L.L.C.," or "LLC.")
(mus	st contain "Limited Elability Company," C.C.C., W. 1990.
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mamust contain "Limited Liability Company," "L.L.	I for the purpose of transacting business in Florida and attach a maging members adopting the alternate name. The alternate name C." or "L.C.")
6. If amending the registered agent and/or register registered agent and/or the new registered office a	ed officer address on our records, enter the name of the new iddress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida Street Address
	. Florida
	City Zip Code
the provisions of all statutes relative to the prope	ent and agree to act in this capacity, I further agree to comply some r and complete performance of my duties, and I am familiar with stered agent as priviled for in Chapter 605, F.S. Or, if this g in the registered affice address, I hereby confirm that the limited

If Changing Registered Agent, Signature of New Registered Agent

Page 4 of 5	2019-04-0	02 11:57:46 CST	12122023573 From: Kimberly Lau
7. If the amendr	nent changes the jurisdiction of organiz	zation, indicate new jurisdiction:	19 APR 2 AM STALLAMASSEE FLOR
8. If the amends	nent changes person, title or capacity in	иссоrdance with 605.0902 (1)(е), ir	ndicate that change:
: Title! Capacity	Name	<u>V đạt ess</u>	Type of Action
			Remove
	· · · · · · · · · · · · · · · · · · ·		Add·
			Remove
,			Add
			Add
			Remove
			Add
			Remove
ອໃດນະຫະດຍ່າ	a certificate, if required: no more than a ned amendment(s), duly authenticated under the law or which this entity is organized.	hy the official having custody of re	reords in the

Filing Fee: \$25.00

Typed or printed name of signee

STATE OF KANSAS OFFICE OF SECRETARY OF STATE

I, Scott Schwab, Kansas Secretary of State, certify that the records of this office reveal the following: That MORTGAGE LENDER OF AMERICA, L.L.C. Is a regularly and properly organized limited liability company under the laws of the state of Kansas, having been incorporated in Kansas on the 15th day of September, A.D., 2000.

FURTHER CERTIFY that a certificate of amendment was filed in this office January 28, 2019 changing the company name from MORTGAGE LENDER OF AMERICA, L.L.C. to ZILLOW HOME LOANS, LLC.

I DO FURTHER CERTIFY that ZILLOW HOME LOANS, LLC is in good standing having fully complied with all requirements of this office.





In testimony whereof:
I hereto set my hand and cause to be affixed my official seal.
Done at the City of Topeka, this 21st day of March, A.D., 2019.

SCOTT SCHWAB
KANSAS SECRETARY OF STATE