

M04000004031

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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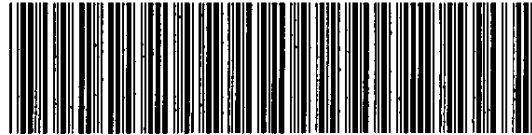
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
08 JUN 12 PM 2:10

J. BRYAN

JUN 13 2008

EXAMINER

PARANET CORPORATION SERVICES, INC.

3675 Crestwood Parkway
Suite 350
Duluth, Georgia 30096
770-497-9977 / 800-277-9977
Fax 770-813-0477 / fax 800-815-0477

TRANSMITTAL LETTER

June 10, 2008

RE: LendingTree Settlement Services, LLC

TO: Florida Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RE: Maggie Ferdinand – maggie@paranetlegal.com
Paranet Job No. 08-05-0053

Please file/submit the following on behalf of the above:

1. Change of Agent Application for each of the above
2. Check No. 91015 Amount \$25.00

After filing return evidence by:

1. Fax (800) 277-9977
2. Mail in self address, stamped envelope

If you have any questions, please call me using our toll free number (800) 277-9977.

THANK YOU FOR YOUR EXCELLENT SERVICE☺

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: Lendingtree Settlement Services, LLC
2. The mailing address of the limited liability company is : _____

09/24/2004
3. Date of filing/registration in Florida

M04000004031
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:


~~CT CORPORATION~~ DEANGELIS, MARIANNE COO
Name
12735 Gran Bay Parkway West, Bldg. 100, Suite 2000
Address
Jacksonville, FL 32258
City, State and Zip

6. The name and address of the new registered agent and/or office:

NRAI Services, Inc.
Name
2731 Executive Park Drive, Suite 4
Florida street address (P.O. Box NOT acceptable)
Weston FL 33331
City, State and Zip

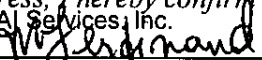
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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


(Signature of a member or authorized representative of a member)

Dwight Skyers
(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 608, 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.

NRAI Services, Inc.

(Signature of Registered Agent)

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