M11000005166

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(Only States Elph Hone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Confidence Confidence of Status					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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2022 KAN 23 PH 3: 5

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: March 23, 2022

ORDER TIME : 2:24 PM

ORDER NO. : 567682-009

CUSTOMER NO: 8371276

CHANGE OF AGENT

NAME: ANGEL OAK HOME LOANS LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

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.

1.	Na	me of the limited liability company: ANGEL OAK HO	OME LO.	OANS LLC	
2	(a)	980 Hammond Drive	(ł	980 Hammond Drive	
	(")	Principal office address of limited liability company:	_ ``	Mailing address of limited liability company:	
		(Note: MUST BE STREET ADDRESS) Suite 200		(Note: MAY BE POST OFFICE BOX) Suite 200	
		Atlanta, GA 30328	_	Atlanta, GA 30328	
		10/14/2011		M11000005166	
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	INCORP SERVICES, INC.			
ν.	()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 17888 67TH COURT NORTH			
		Registered Office Address (MUST BE FLORIDA STREET)	1DDRESS		
		LOXAHATCHEE FL	33470		
				<u> </u>	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	065		
		Cites hame of NEW Registered Agent and/of NEW Registered	vince au	address:	
	Corporation Service Company				
		NEW Registered Office Address:			
		1201 Hays Street			
		Tallahassee	32301		
		, FL			
cha age wa	ange ent v s/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registere bility co f the lim	ered office and the business office of the registered company, it is hereby confirmed that the change(s) mited liability company or as otherwise provided in	
		ven Schwalb	Ste	even Schwalb, Manager	
	-	ure of a member or authorized representative of a member		Printed or typed name of signee	
pro the to t	ovisi obli mere	by accept the appointment as registered agent and agro ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I h Lin writing of this change,	perform	nance of my duties, and I am familiar with and accept	
	\mathcal{X}	re of Registered Agent	Grace	ce E. Kirby, Asst. Vice President	