

M12000001654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200270661642

03/25/15--01007--026 \*\*25.00

FILED  
15 MAR 25 AM 9:11

Delivers APR 16 2015



**First American**  
MORTGAGE SOLUTIONS

March 20, 2015

**VIA U.S. MAIL**

Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: **FA Business Services, LLC**  
Your File No. M12000001054

Dear Sir or Madam:

Enclosed is the Amended Certificate of Registration for the above referenced entity along with a check in the amount of twenty five dollars (\$25.00) for the filing fees.

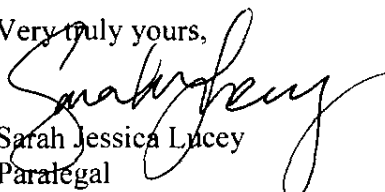
Please return proof of filing to:

Sarah Jessica Lucey  
First American Mortgage Solutions  
3 First American Way  
Santa Ana, CA 92707

If you have any questions, please contact the undersigned.

Thank you.

Very truly yours,

  
Sarah Jessica Lucey  
Paralegal  
Phone: (714) 250-5017  
E-mail: [slucey@firstam.com](mailto:slucey@firstam.com)

/sjl

Enclosures: As stated above.

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FA Business Services, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sarah Jessica Lucey

Name of Person

First American Title Insurance Company

Firm/Company

3 First American Way

Address

Santa Ana, CA 92707

City/State and Zip Code

slucey@firstam.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sarah Lucey

Name of Person

at ( 714 ) 250-5017

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:**

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

**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 Department of State: FA Business Services, LLC
2. The Florida document number of this limited liability company is: M12000001054
3. Jurisdiction of its organization: Delaware
4. Date authorized to do business in Florida: 2/24/2012

**SECTION II (5-9 complete only the applicable changes)**

5. New name of the limited liability company: First American Mortgage Solutions, LLC  
(must contain "Limited Liability Company," "L.L.C." or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida Street Address

\_\_\_\_\_, Florida  
City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

*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 605, 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.*

\_\_\_\_\_  
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

\_\_\_\_\_

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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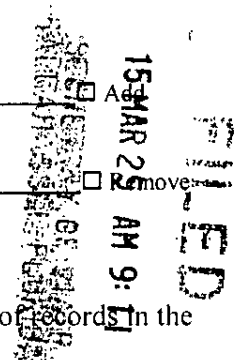
9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

  
\_\_\_\_\_  
Signature of the authorized representative

**Jeffrey S. Robinson, Manager**  
\_\_\_\_\_  
Typed or printed name of signee

Typed or printed name of signee

**Filing Fee: \$25.00**



# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "FA BUSINESS SERVICES, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "FIRST AMERICAN MORTGAGE SOLUTIONS, LLC", THE TWENTY-EIGHTH DAY OF JANUARY, A.D. 2015, AT 5:07 O'CLOCK P.M.

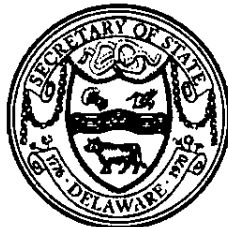
AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

FILED  
15 MAR 25 AM 9:11  
SECRETARY OF STATE  
DELAWARE

4902375 8320

150167115

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2105574

DATE: 02-09-15