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K. SALY EXAMINER MAY -7 2013

COVER LETTER

Division of Corporations			
SUBJECT: MORTGAGE 1St LENDING, LLC			
Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to	o the following:		
Jon SPANSTER Name of Person			
Mortgage 1st Lending, LIC	2		
8586 Potter Park Dr Address			
SAVASOTA, FL 34238			
City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Jon Spangler at (941	756-0400		
Name of Person	Area Code & Daytime Telephone Number		
	IAILING ADDRESS:		
	egistration Section		
	ivision of Corporations O. Box 6327		
<u> </u>	allahassee, Florida 32314		
Enclosed is a check for the following amount:			
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy		

TO: Registration Section

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. Name of the limited liability company:Mortgag	e 1st Lending, 4c
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	8586 Potter Park dur SAMASOTA, FL 34338
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	SAYASOTH, FL 3438
3/14/2013	M120000027衰衰 2 何
3. Date of filing/registration in Florida 4	. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of States
Registered Agent:	USA-BALLC BE
Registered Office Address:	841 Prufential Dr
	JACKSONVIKE, FL 32207 UK
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:
NEW Registered Agent:	Jon Spangler
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8586 Potler Park dr Sarasota
	,FL <u>34238</u>
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Flo and the business office of the registered agent will be identically liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	orida street address of the registered office
Jon Spangler	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the proj and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mere address I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agend	

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