M1300001291

(Requestor's Name)						
(Address)						
(Address)						
(0	City/State/Z	ip/Phone #)				
PICK-UP	□ v	VAIT	MAIL.			
(Business Entity Name)						
(Document Number)						
Certified Copies	Ce	ertificates of	Status			
Special Instructions to Filing Officer:						

Office Use Only



200273293982

06/19/15--01023--023 **25.00



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: June 17, 2015

Order#: 641162-068

Re: SHELTER LENDING SERVICES, L.L.C.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Lockard

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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: SHELTER LEND	ING SE	RVICES, L.	L.C.
2	(a)	4000 W. Brown Deer Road	_ (b)	
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (°		failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite E	_		
		Brown Deer WI 53209	_		
		002/27/2013	-	M1300000	
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	NRAI Services, Inc.			
	` ,	Registered Agent and Registered Office shown on the records of the	:		
		1200 South Pine Island Road			2915
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			ے ڈٹی
					- SA
		Plantation , FL	33324		
					्र इ.स.
	(b)	Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Company</u>	Office add	lress:	(원리 53 -
		Finet hame of NEW Registered Agent and/or NEW Registered	Jinet auc	<u>11 C33</u> .	
		1201 Hays Street			
		NEW Registered Office Address:			
		Tallahassee , FL	32301		
the ag wa	e cha ent v is/we	imited liability company is not organized under the law- inge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regis bility co the lim	tered office mpany, it is ited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
		0000	Don		thorized Person
	_	ture of a member or authorized representative of a member			Printed or typed name of signee
pr the to	ovisi 2 obl mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided elv reflect a change in the registered office address, I ha I in writing of this change.	e to act performa for in C ereby co	in this capa ance of my d Chapter 605, onfirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
c:	<u> </u>	Inace C-Kuby	DV: C		hu Angt VD
31	gnatu	re of Registered Agent Corporation Service Company	ធរៈ បា	race E. Kirl	by, Asst. VP