⊙ 06/15/2022 7:42 AM - •

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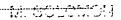
Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

	Division of Corporations	
	Fax Number : (850)617-6383	
From:		
	Account Name : REGISTERED AGENT SOLUTIONS INC	
	Account Number : I20100000062	,,
	Phone : (888)705-7274	- 1
	Fax Number : (888)706-7274	-,
***Enter ar	the email address for this business entity to be used for future inval report mailings. Enter only one email address please.**	: 7
En	nail Address:	
	LLC REGISTERED AGENT CHANGE	

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

JUN 16 2022



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 1ST AMERICAN LEN	
Name of Lin	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	r to the following:
Joshua Murphy	
Name of Person	
Registered Agent Solutions, Inc.	,
Firm/Company	
Corporate Center One, 5301 Southwest Pkwy	y, Ste 400
Address	-
Austin, TX 78735	
City/State and Zip Code	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please	
	888 705-7274
at (_)
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amoun	nt:

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

□ \$25 Filing Fee

15129570210

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.

I. Na	me of the limited liability company: 1ST AME	RICA	N LENDII	NG LLC			
	277 FAIRFIELD RD, STE. 335	5 _{(t}	277 FAIF	RFIELD RD, S	TE. 33	5	_
- (- ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	FAIRFIELD, NJ 07004	FAIRFIELD, NJ 07004					
	0/0/0046	_	M16000	000020			_
	2/3/2016	- ,		ocument number			_
3.	Date of filing/registration in Florida	4. 'D\ 4.CE	_	ocument number			
5. (a)	BLUMBERGEXCELSIOR CORPORATE SE						
	Registered Agent and Registered Office shown on the records of 155 OFFICE PLAZA DR.1ST						
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES.	<u>S)</u>			98	
						2022	
	TALLAHASSEE	3230	01			ST NOF	
(b)	Registered Agent Solutions, Inc.						r
` '	Enter name of NEW Registered Agent and/or NEW Registered	Office ac	<u>ldress</u> :		(45)	A± 8:	(
	155 Office Plaza Dr.				'B	3: 3: 5≥	
	NEW Registered Office Address:						
	Suite A						
	Tallahassee, FI.	3230	01				
the cha agent v	imited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited libere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	ws of the fine regulation in the firm of t	e State of Flor istered office a company, it is l nited liability	and the business off hereby confirmed th company or as other	ice of the lat the cha	registei ngc(s)	

Signature of a member or authorized representative of a member

Ricardo Suarez

Authorized Person

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 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.

Mackenzie Hart, Asst. Secretary

Signature of Registered Agent

/s/ Ricardo Suarez