M16000003132

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P r	COVER LETTER				
(C): Registration Section Division of Corporations	•				
F3EA Servicing LLC					
	e of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.				
Please return all correspondence concerning thi	s matter to the following:				
Mollie Wander, Esq.					
Name of Person					
F3EA Servicing LLC					
Firm/Company					
1855 Griffin Road, B390					
Address					
Dania, FL 33004					
City/State and Zip Code					
molliew@f3easervicing.com					
E-mail address: (to be used for future annu	ual report notification)				
or further information concerning this matter.	please call:				
Mollie Wander, Esq.	240 676-4149				
Name of Person	at ()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	☐ \$55 Filing Fee & Certified Copy				

NHS18 (2/14)

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.

. Na	ame of the limited liability company: F3EA Service	ing LLC			
(a)	no change		(b) no change		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	03/14/2016 Date of filing/registration in Florida	 4.	M16000	003132 Document number	
	Date of fitting registration in Florida	٦.		Document number	
(a)	Registered Agent and Registered Office shown on the records of	t the Florida	Dept. of Sta		
	CT Corporation System				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	2	- Div.	
	1200 S Pine Island Rd			6 1860	
	Plantation	33324		S PET	
	, I'I	L		- Garage	
(b)				9 PF 51	
` ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office add	lress:	- 4 AA	
	Aura Prata			- %	
	NEW Registered Office Address:			_	
	1855 Griffin Road, B390			_	
	Dania	L 33004			
				_	
e cha gent v as/wo	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I ere anthorized by an affirmative vote of the members desof organization or the operating agreement of the	of the regist iability co of the limuse limited I	stered office impany, it ited liabili iability co	ce and the business office of the registerer is hereby confirmed that the change(s) ity company or as otherwise provided in mpany.	
× ×	ture of a member or authorized representative of a member	Ada ——	am S. Gr ———	Printed or typed name of signee	
herei rovisi e obl mere otified	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of any position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	e performe	ance of mi	pacity. I further agree to comply with the duties, and I am familiar with and accep	
gnatu	re of Registered Agent				