M 180000 10633

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(City/State/Zip/Phone #)
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838

F: 866.625.0839

COGENCYGLOBAL.COM

Account#: I20000000088

Date:	08/21/2023	
Name:		_
Reference a	#:2089904	_
Entity Name	e: HOMELIGHT	SETTLEMENT, LLC
	les of Incorporation/Authorization	to Transact Business
✓ Char	nge of Agent	
	statement	
☐ Conv	version ger	
☐ Disso	olution/Withdrawal	
Fictit	ious Name	
Othe	er	
Authorized	Amount: \$25.00	<u> </u>

F: 800.944.6607

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. N	ame of the limited liability company: HOMEL	<u> IGHT</u>	SETTL	_EMENT,	LLC	,	
2. (a)							
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) ange			
	No Change		No Chai				
	November 16, 2018		N	118000010633	J		
3.	Date of filing/registration in Florida	4.		Document nur	nber		
5. (a)	, INCORPORATING SERVICES, LTD						
. (4	Registered Agent and Registered Office shown on the (ecords)	of the Florida	Dept of State	- e:			
	1540 GLENWAY DR						
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_			
						2023	
	TALLAHASSEE	32301		-	LAHASSEE, FLORIDA	AUG	***
(b)	COGENCY GLOBAL INC.				SSEE.	21 A	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			AH 9:			
	115 North Calhoun St., Suite 4				JRIDA JRIDA): 52	
	NEW Registered Office Address:			_			
	Tallahassee	32301		.			
	- I	.], 02001		-			
the ch agent was/w	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members licles of organization or the operating agreement of the	of the regist liability cor s of the limi	ered office upany, it is ted liability	e and the busine s hereby confir y company or a	ess offic med that	e of th the el	e registered nange(s)
/s/ A	lexander Jee	Alexa	ınder Jee	9			
Signa	ature of a member or authorized representative of a member			Printed or typed	name of s	ignee	•
provis the ob to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provia ely reflect a change in the registered office address, el in writing of this change.	ie nertorma	nce of mv	duties and Lan	n familie	n with	and accept
	imothy Mayville						
Signati	ure of Registered Agent						