M220000 16508

(Requestor's Name)							
(Address)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer							
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Office Use Only



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CSC - Tallahassee
CSC 1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext: x62969 Date: 07/09/25 Order #: 3909395-5

Re: PROMISE HOMES BORROWER I, LLC

Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25.00 - FL State Account Number: I20000000195

Please take the following action:

File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Amanda Miller c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

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

## 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.

t. Na	nme of the limited liability company: PROMISE HOME	ES B	ORI	ROWER I, I	LLC	
2. (a)	26050 MUREAU RD., STE. 110 CALABASAS, CA 91302	2	(b)	191 PEAC	HTREE STREET N	E ATLANTA, CA 30303
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_	(0,		Mailing address of limit (Note: MAYBE PO	
	10/27/2022	<del></del>	i -	M22000016		
3.	Date of filing/registration in Florida	4.			Document number	
5. (a)	COGENCY GLOBAL INC.				_	
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 115 NORTH CALHOUN STREET STE 4				<b>:</b> :	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				-	2025 JUL -9
	TALLAHASSEE , FL	3230	1		· -	6-31
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company				-	- D - 36 - 36
	NEW Registered Office Address:					
	1201 Hays Street				-	
	Tallahassee, FL_	3230	)1		-	
change agent v was/wa	imited liability company is not organized under the law to changes are made, the Florida street address of the twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the I	regis bility `the	tere cor limi	d office and upany, it is ted liability	I the business offic hereby confirmed company or as off	e of the registered that the change(s)
/S.	/ Kim Magel	۲	Kim	Magel, Autl	horized Person	
Signa	ture of a member or authorized representative of a member	_			Printed or typed name	of signee
provisi the obl to meri	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	e to perfor for i ereby	act i rma in C. v co:	in this capa nce of my a hapter 605, nfirm that t	icity. I further agre luties, and I am fan . F.S. Or, if this do he limited liability	ee to comply with the niliar with and accept ocument is being filed company has been
Signatu	re of Registered Agent					

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