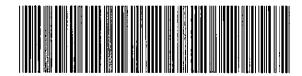
M88867

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	.IL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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VIA FEDEX: 779273020532

October 15, 2024

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Statement of Change of Registered Office/Agent

Company: Home Buyers Warranty Corporation VI (the "Company")

Document #: M88867

To Whom It May Concern:

Enclosed please find a fully executed Statement of Change of Registered Office/Agent and the fee of \$35.00 for the Company. Please feel free to contact me with any questions at rrubida@2-10.com or 720.747.6007. Thank you for your assistance with this matter.

HOME BUYERS WARRANTY CORPORATION VI

Sincerely,

Renee Rubida Regulatory Analyst

Parice Pulida

Enclosures

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: HOME BUYERS WARRANTY CORI	PORATION VI
Name of Corporation	
DOCUMENT NUMBER: M88867	
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this	s matter to the following:
MICHAEL C. FLETCHER	
Name of Contact Person	
HOME BUYERS WARRANTY CORPORATION V	VI
Firm/Company	
13900 EAST HARVARD AVENUE	
Address	
AURORA. CO 80014	
City/State and Zip Code	
LEGAL@2-10.COM	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, p	please call:
MICHAEL C. FLETCHER	at (720) 747-6214 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the	Department of State.
Mailing Address: Amendment Section	Street Address: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee. FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Stange is submitted for a corporation organized under the laws of the State of $\overline{\text{FLG}}$ to change its registered office or registered agent, or both, in the State of Flor	ORIDA	
1. The name of t	ne corporation: HOME BUYERS WARRANTY CORPORATION VI		
	office address: 13900 EAST HARVARD AVENUE, AURORA, CO 80014		
3. The mailing ac	ddress (if different):		
4. Date of incorp	oration/qualification: 07/08/1988 Document number: M88867		
	street address of the current registered agent and registered office on file with tment of State: (If resigned, enter resigned)	the	
	CORPORATION SERVICE COMPANY		
	1201 HAYS STREET		
	TALLAHASSEE, FL 32301		2460
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office		607 17 6375: 24
	FLORIDA CHIEF FINANCIAL OFFICER		÷ ;
	200 EAST GAINES STREET		∑ ::
	P.O. Box. NOT acceptable TALLAHASSEE, FL 32399-0301	I. *	~
The street addre as changed will	ss of its registered office and the street address of the business office of its r be identical.	egister	ed agent.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an of e board, or the corporation has been notified in writing of the change.	ficer so)
- Mic.	MICHAEL C. FLETCHER, Sr. VP, C	GC, and	Sec.
I further agree to of my duties, and document is bein	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and compl d I am familiar with and accept the obligation of my position as registered a ng filed merely to reflect a change in the registered office address. I hereby been notified in writing of this change.	ete per igent. (confirn	formance Or, if this a that the
N/A	October 14, 2024 Date Date		
Sign	nature of Registered Agent Date		
If signing on bel	half of an entity:		
FLORIDA CFO	Lo Bin Alban		
Ty	* * * FILING FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)