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(Re	questor's Name)	
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Certified Copies		of Status
Special Instructions to	Filing Officer:	

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**B. KOHR** 

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**EXAMINER** 



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EFFECTIVE DATE 12/31/2011





ACCOUNT NO. : I2000000195 REFERENCE : 032888 7286385 AUTHORIZATION : COST LIMIT : ORDER DATE: December 20, 2011 ORDER TIME : 9:20 AM EFFECTIVE DATE ORDER NO. : 032888-040 CUSTOMER NO: 7286385 FOREIGN FILINGS NAME: CORELOGIC REAL ESTATE SOLUTIONS, LLC CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY XXXX AMENDMENT \*\*\*CLIENT WOULD LIKE 12/31/11 EFFECTIVE DATE\*\*\* PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_ CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Becky Peirce -- EXT# 2919

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACTE BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

	EFFECTIVE DATE 12/3/1201
1.	Name of limited liability company as it appears on the records of the Florida Department of State: CoreLogic Real Estate Solutions, LLC
2.	Jurisdiction of its organization: California
3.	Date authorized to do business in Florida: December 30, 1998
	SECTION II (4-7 complete only the applicable changes)
4.	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? <u>December 31, 2011</u>
5.	New name of the limited liability company: CoreLogic Solutions, LLC  (must end with "Limited Liability Company," "L.L.C.," or "LLC.")
Fl th or	f name unavailable, enter alternate name adopted for the purpose of transacting business in orida and attach a copy of the written consent of the managers or managing members adopting e alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." "LLC.")  If the amendment changes the period of duration, indicate new period of duration:
7.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
8.	If the amendment corrects any false statement, indicate the statement being corrected and the correction:
9.	Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.  Signature of a member or the authorized representative of a member

Filing Fee: \$25.00

Corinna Cherian, Asst. Sec. of sole member
Typed or printed name of signee

#### State of California Secretary of State

## CERTIFICATE OF FILING OF NAME CHANGE

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

That on the 21st day of December, 2011, there was filed in this office an amendment whereby the Limited Liability Company name of CORELOGIC REAL ESTATE SOLUTIONS, LLC, a(n) California limited liability company, was changed to: CORELOGIC SOLUTIONS, LLC.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of December 28, 2011.



Jeha Bowen

DEBRA BOWEN Secretary of State



#### State of California Secretary of State

## LIMITED LIABILITY COMPANY CERTIFICATE OF AMENDMENT

A \$30.00 filing fee must accompany this form.

### EFFECTIVE DATE

12-81-2011

ENDORSED - FILED in the office of the Secretary of State of the State of California

DEC 21 2011

i		· · · · · · · · · · · · · · · · · · ·			•
	IMPORTANT - Read instructions be	_ ·		Space For	Filing Use Only
1.	SECRETARY OF STATE FILE NUMBER	2. NAME OF LIMITED LIABILITY	COMPANY		
	199731610036	CoreLogic Real Estate Solutions, t	LLC		
3.	COMPLETE ONLY THE SECTIONS WHERE NECESSARY.	INFORMATION IS BEING CHANGED.	ADDITIONAL PAG	SES MAY BE	ATTACHED IF
	A. LIMITED LIABILITY COMPANY NAME ABBREVIATIONS "LLC" OR "L.L.C.")	E (END THE NAME WITH THE WORDS "LIMI	TEO LIABILITY COMP	'ANY," "LTD. LIA	ABILITY CO.* OR THE
	CoreLogic Solutions, LLC				
	B. THE LIMITED LIABILITY COMPANY OF MANAGER MORE THAN ONE MANAGER ALL LIMITED LIABILITY COMPA	WILL BE MANAGED BY (CHECK ONE) NY MEMBER(S)	:		
	C. AMENDMENT TO TEXT OF THE ARTI	ICLES OF ORGANIZATION:	·		
					•
4.	A PART OF THIS CERTIFICATE. O	IN THIS CERTIFICATE MAY BE SET F THER MATTERS MAY INCLUDE A C /E OR ANY CHANGE IN THE EVENTS	HANGE IN THE L	ATEST DATE	E ON WHICH THE LIMITED LUTION.
	A PART OF THIS CERTIFICATE. O LIABILITY COMPANY IS TO DISSOLV FUTURE EFFECTIVE DATE, IF ANY:	THER MATTERS MAY INCLUDE A C	HANGE IN THE L	ATEST DATE	ON WHICH THE LIMITED
4.	A PART OF THIS CERTIFICATE. O LIABILITY COMPANY IS TO DISSOLV	THER MATTERS MAY INCLUDE A C /E OR ANY CHANGE IN THE EVENTS	CHANGE IN THE L	ATEST DATE	E ON WHICH THE LIMITED LUTION.
	A PART OF THIS CERTIFICATE. O LIABILITY COMPANY IS TO DISSOLV FUTURE EFFECTIVE DATE, IF ANY:	MONTH December	CHANGE IN THE LETHAT WILL CAUSE	ATEST DATE THE DISSOI	YEAR 2011
5.	A PART OF THIS CERTIFICATE. O LIABILITY COMPANY IS TO DISSOLV  FUTURE EFFECTIVE DATE, IF ANY:  NUMBER OF PAGES ATTACHED, IF ANY:  IT IS HEREBY DECLARED THAT I AM THE I	MONTH December	DAY  RUMENT, WHICH E	31  XECUTION IS	YEAR 2011
5.	A PART OF THIS CERTIFICATE. O LIABILITY COMPANY IS TO DISSOLV  FUTURE EFFECTIVE DATE, IF ANY:  NUMBER OF PAGES ATTACHED, IF ANY:  IT IS HEREBY DECLARED THAT I AM THE I SIGNATURE OF AUTHORIZED PERSON	THER MATTERS MAY INCLUDE A CATE OR ANY CHANGE IN THE EVENTS  MONTH December  PERSON WHO EXECUTED THIS INSTE	DAY	31  XECUTION IS	YEAR 2011
5.	A PART OF THIS CERTIFICATE. O LIABILITY COMPANY IS TO DISSOLV  FUTURE EFFECTIVE DATE, IF ANY:  NUMBER OF PAGES ATTACHED, IF ANY:  IT IS HEREBY DECLARED THAT I AM THE I	MONTH December  PERSON WHO EXECUTED THIS INSTITUTE OF THE STREET OF THE	DAY  RUMENT, WHICH E	31  XECUTION IS	YEAR 2011
5.	A PART OF THIS CERTIFICATE. O LIABILITY COMPANY IS TO DISSOLV  FUTURE EFFECTIVE DATE, IF ANY:  NUMBER OF PAGES ATTACHED, IF ANY:  IT IS HEREBY DECLARED THAT I AM THE I SIGNATURE OF AUTHORIZED PERSON  Corinna Cherian, Assistant Secretary of C	MONTH December  PERSON WHO EXECUTED THIS INSTITUTE OF THE STREET OF THE	DAY  RUMENT, WHICH E	31  XECUTION IS	YEAR 2011
5. 6.	A PART OF THIS CERTIFICATE. O LIABILITY COMPANY IS TO DISSOLV  FUTURE EFFECTIVE DATE, IF ANY:  NUMBER OF PAGES ATTACHED, IF ANY:  IT IS HEREBY DECLARED THAT I AM THE I SIGNATURE OF AUTHORIZED PERSON  Corinna Cherian, Assistant Secretary of C TYPE OR PRINT NAME AND TITLE OF AUTHORIZE  RETURN TO:  NAME	MONTH December  PERSON WHO EXECUTED THIS INSTITUTE OF THE STREET OF THE	DAY  RUMENT, WHICH E	31  XECUTION IS	YEAR 2011

i hereby carlify that the foregoing tremodigitof page(a) in a full, from and collect copy of the original arrord in the cestady of the Coplemia Secretary of States office.

OEC 2 2 2011

Date:

DEBRA BOWEN, Secretary of State