P01000062528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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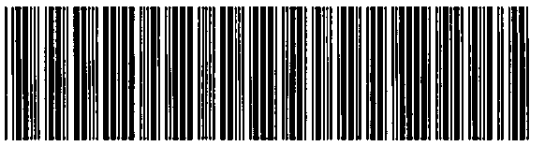

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COVER LETTER

2018 MAY -9 A 11:

TO: Amendment Section
Division of Corporations

SUBJECT: CASH TO CLOSE, LLC
Name of Corporation

DOCUMENT NUMBER: P0 10000162528

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following.

CAREN BLYSTONE
Name of Contact Person

CASH TO CLOSE LLC
Firm/Company

2401 W STATE ROAD 434, SUITE 125A
Address

LONGWOOD, FL 32779
City/State and Zip Code

EXITLONGWOOD@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CAREN BLYSTONE at (407) 788-6474
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
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

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

2018 MAY -9 AM 11:

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508 Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FL *in order to change its registered office or registered agent, or both, in the State of Florida.*

1 The name of the corporation: CASH TO CLOSE, LLC

2 The principal office address: 2401 W SR 434, STE 125A
LONGWOOD, FL 32779

3 The mailing address (if different) _____

4 Date of incorporation/qualification: 6/21/01 Document number P01000062528

5 The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

BRIAN ELIAS
2401 W S.R 434, STE 125A
LONGWOOD, FL 32779

6 The name and street address of the new registered agent (if changed) and /or registered office (if changed):

DAVID C. LOBSINGER
2401 W S.R 434, STE 125A
P O Box NOT acceptable
LONGWOOD, FL 32779

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change

Signature of an officer or director — JAMIE PETTEWAY — Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

David Lobsinger — 5/8/18
Signature of Registered Agent — Date

If signing on behalf of an entity:

_____
Typed or Printed Name

* * * 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 (03/12)