

06/12/2017 14:40

FAX 845 818 3588

P.001/002

Division of Corporations  
Florida Department of State  
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To:  
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Fax Number : (850)617-6380

From:  
Account Name : Vcorp SERVICES, LLC  
Account Number : I20080000057  
Phone : (845)425-0077  
Fax Number : (845)818-3588

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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S. TALLENT

JUN 14 2017

REGISTERED AGENT CHANGE  
NEW YORK MORTGAGE EXCHANGE CORP.

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17 JUN 13 PM 4:51

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



June 13, 2017

FLORIDA DEPARTMENT OF STATE

NEW YORK MORTGAGE EXCHANGE CORP. Division of Corporations  
PO BOX 417  
GREENVALE, NY 11548

SUBJECT: NEW YORK MORTGAGE EXCHANGE CORP.  
REF: P03000003311

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The capacity of the person signing the document must be typed or printed beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent  
Regulatory Specialist II

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06/13/2017 10:38

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P.002/002

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

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 Florida \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: New York Mortgage Exchange Corp.
2. The principal office address: 369 Avenue X, Brooklyn, NY 11223
3. The mailing address (if different): PO Box 417, Greenvale, NY 11548
4. Date of incorporation/qualification: 01/09/2003 Document number: P03000003311
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)

Lerner, Dmitry1063 Hillsboro Mlle, #605Hillsboro Beach, FL 33062

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

Vcorp Services, LLC5011 South State Road 7, Suite 106

P.O. Box NOT acceptable

Davie, FL 33314

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.

Eugene Volynets  
Signature of an officer or director

EUGENE VOLYNETS, President  
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.

[Signature]  
Signature of Registered Agent

6/13/17  
Date

If signing on behalf of an entity:

Anthony Palazzo, Secretary  
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  
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