

Florida Department of State
Division of Corporations
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To: Division of Corporations
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****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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**CORPORATION REINSTATEMENT
REAL ESTATE SERVICING SOLUTIONS INC.**

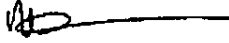
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OCT 12 2015

R. HUNT

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P08000003265					
1. Corporation Name Real Estate Servicing Solutions Inc.					
2. Principal Office Address - No P.O. Box # 1661 Worthington Road Suite, Apt. #, etc. Suite 100 City & State West Palm Beach, FL Zip 33408			3. Mailing Office Address P.O. Box 24737 Suite, Apt. #, etc. City & State West Palm Beach, FL Zip 33416-4737		
			4. Date Incorporated or Qualified To Do Business in Florida 01/09/2008		
			5. FEI NUMBER Applied For Not Applicable		
			6. CERTIFICATE OF STATUS DESIRED 50.75 % Ownership Fee required for 1 Certificate of Status		
7. Name and Address of Current Registered Agent Name Corporation Service Company Street Address (P.O. Box Number is Not Applicable) 1201 Hays Street Suite, Apt. #, etc. City Tallahassee State FL Zip Code 32301					
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of sections 607.0505 or 617.0503, F.S. Signature of Registered Agent  Date 10/12/2015 REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
Pres./ CEO	Ronald M. Faris	1661 Worthington Rd, Ste 100		West Palm Beach, FL 33409	
Sec.	Timothy M. Hayes	402 Strand Street		Frederiksted, USVI 00840	
REINSTATEMENT					
OCT 12 2015					
R. HUNT					
10. E-mail Address: <u>Lynn.Almeida@ocwen.com</u> (To be used for future annual report notifications)					
11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 617.155, F.S.					
SIGNATURE: 		Ronald M. Faris, President		10/8/2015 561,682,980	