## PHODOIS

(Re	equestor's Name)				
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## COVER LETTER

TO: Amendment Section Division of Corporations						
SUBJECT: A1 Mortgage Processing Name of Corpora	Services, Inc.					
	ation					
DOCUMENT NUMBER: P1400000118	<del></del> <del></del>					
The enclosed Statement of Change of Registered Office Age	mt and fee are submitted for filing.					
Please return all correspondence concerning this matter to the	ne following:					
Jason Kulwicki						
Name of Contact Person						
A1 Mortgage Processing Services, Inc.						
Firm Company						
13714 Whitby Road						
Address						
Hudson, FL 34667						
City/State and Zip Code						
Jason@A1mtgpro.com						
E-mail address: (to be used for future annual report notification)						
10 of all and of controls are a control of the cont						
For further information concerning this matter, please call:	727 067 2120					
Jason Kulwicki Name of Contact Person	Area Code & Daytime Telephone Number					
Name of Confact (Cisor	Area Code & Daytine Telephone Sumbo					
Enclosed is a \$35,00 check made payable to the Department	of State.					
<u>Mailing Address:</u> Amendment Section	Street Address: Amendment Section					
Division of Corporations	Division of Corporations					
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle					
remainded to and to	Tallahassee, FL 32301					

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

statement of ch	provisions of sections 607.05 ange is submitted for a corpor	ration organized	under the laws of i	the State of Flo	orida	
	er to change its registered offi A 1. Morta				rīdā.	
1. The name of	the corporation: A1 Mortg	age Process	Undoon EL 3	5, ITIC. 		. — —
2. The principa	d office address: 13714 Wh	niidy Road,	muoson, FL (	34007		
3. The mailing	address (if different):				****	
4. Date of inco	rporation/qualification: 2014	4	Document numb	er: P14000	000118	
5. The name ar	nd street address of the current artment of State: (If resigned, c	registered agent				
	Jason Kulwicki					
	6935 Oelsner Stree					
		· — — — — —		<u> </u>		
6. The name ar (if changed):	nd street address of the new reg	gistered agent (if	changed) and /or r	registered offic	18 TALL	
	13714 Whitby Road	<u> </u>		- <del></del>		-17
	Hudson, FL 34667		able		22 	IT
						0
The street add	ress of its registered office an II be identical.		ess of the business		regished agent	! <b>.</b>
authorized by	vas authorized by resolution d the board, or the corporation	has been notified	is board of directe in writing of the	change.	neer so	
	Jason Kulwicki Printed or typed name and title					
- Uhereby accen	of the appointment as registery to comply with the provision of my duties, and I am familian his document is being filed mo that the corporation has bec	ed avent and av	ee to act in this c	anacity.		
X-	- 16CC		12-5-1	7		
	ognature of Registered Agent			Date		
H signing on b	ehalf of an entity:					
	Typed or Printed Name					
	* * * <b>)</b> .	FILING FEE: \$:	35.00 * * *			