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To:

Division of Corporations

Fax Number : (850)617-6380

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number

: (855)330-1010

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

₹Email Address:\_

## REGISTERED AGENT CHANGE MORTGAGE MART CORPORATION

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C. BRUMBLEY

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

statement of change is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	
I. The name of the corporation: Mortgage Mart	Corporation	
2. The principal office address: 8 THE GREEN		
3. The mailing address (if different):		
4. Date of incorporation/qualification: $11/19/21$	Document number: P21000098892	
5. The name and street address of the current regist Florida Department of State; (If resigned, enter r		
FESSEY, KEITH J	. 202	
1971 W LUMSDEN RD	1971 W LUMSDEN RD #131	
BRANDON, FL 33511		
FESSEY, KEITH J  1971 W LUMSDEN RD #131  BRANDON, FL 33511  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Registered Agents Inc.		
Registered Agents Inc.	3	
7901 4th St N STE 300		
	P.O. Box NOT acceptable	
St. Petersburg FL 3370	02	
The street address of its registered office and the as changed will be identical.	street address of the business office of its registered agent,	
Such change was authorized by resolution duly acauthorized by the board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
Signature of an officer or director	Keith Fessey - CEO	
I hereby accept the appointment as registered aga I further agree to comply with the provisions of a of my duties, and I am familiar with and accept th document is being filed merely to reflect a change corporation has been notified in writing of this ch	ll statutes relative to the proper and complete performance he obligation of my position as registered agent. Or, if this e in the registered office address, I hereby confirm that the	
Signature of Registered Agent	01/17/2022	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
Bill Havre		
Typed or Printed Name		

\* \* \* FILING FEE: \$35.00 \* \* \*