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| From: | Account Name Account Number Phone | : C T CORPORATION SYSTEM : FCA000000023 : (850)222-1092 | | | | |

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: (850)878-5368

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REGISTERED AGENT CHANGE ACCESS MORTGAGE CORPORATION

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AUG 1.4 2013 T. LENNIEUX

8/13/2013

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

ì

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida State ange is submitted for a corporation organized under the laws of the State of Flor er to change its registered office or registered agent, or both, in the State of Flor | rida | |
|---------------------------------|---|-----------------------------------|---|
| | the corporation: Access Mortgage Corporation | - | |
| 2. The principal | office address: 13331 US Highway 98 West, Miramar Beach, | FL 32550 | |
| 3. The mailing a | address (if different): Attention: Teresa Z. Lygate | | |
| | Charles Avenue, Suite 626, New Orleans, LA 70130 | | |
| 4. Date of incor | rporation/qualification: 5-18-1993 Document number: P930000 |)35864 | |
| | ad street address of the current registered agent and registered office on file with artment of State: (If resigned, enter resigned) | the | |
| | Thomas D. Tait | | |
| · | 1010 West Garden Stret | 至為 | 100 |
| | Pensacola, FL 32502 | C. C. | ZUF3 AUG |
| 6. The name an (if changed): | nd street address of the new registered agent (if changed) and for registered office: | SEC: ALLANAOSCE, HUGO, O | 3 |
| | C T Corporation System | - T | ======================================= |
| | 1200 South Pine Island Road | E)m | |
| | P.O. Box NOT acceptable | *** | 0 |
| | Plantation, FL 33324 | | |
| The street address changed wil | ress of its registered office and the street address of the business office of its reliable identical. | egistered agen | il, |
| Such change wanthorized by t | vas authorized by resolution duly adopted by its board of directors or by an off the board, or the corporation has been notified in writing of the change. | licer so | |
| - Dury | Teresa Z. Lygate, Assistant Corpon | ate Secretary | |
| | of the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and compl of my duties, and I am familiar with and accept the obligation of my position a his document is being filed merely to reflect a change in the registered office o In that the corporation has been notified in writing of this change. | etc s registered address, I | |
| BA: BA | Emiliate of Registered Agent | | |
| | Cheerles Halled Name | ٠. | |
| • | Typed or Printed Name * * * FILING FEE: \$35.00 * * * | | |
| _ | 5. 25-mt 1-2 5. 23-20; November | | |

Make checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
CR2E045 (03/12)