

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003498

Entity Name: RESIDENTIAL FACILITATORS, LLC

Current Principal Place of Business:

1400 CHERRINGTON PKWY
MOON TOWNSHIP, PA 15108

Current Mailing Address:

C/O APRIL JOHNSON
601 RIVERSIDE AVENUE
JACKSONVILLE, FL 32204 US

FEI Number: 57-1178073

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name ATM HOLDINGS. LLC
Address 1400 CHERRINGTON PKWY
City-State-Zip: MOON TOWNSHIP PA 15108

Title PCEO
Name QUIRK, RAYMOND R
Address 601 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32204

Title CFO
Name PARK, ANTHONY J
Address 601 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32204

Title EVP/GC/S
Name GRAVELLE, MICHAEL L
Address 601 RIVERSIDE AVE
City-State-Zip: JACKSONVILLE FL 32204

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ATM HOLDINGS, LLC

MGR

04/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date