(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	:
(Business Entity Name)	
(Document Number)	
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10/19/09--01021--022 **35.00

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

statement of cha	nge is submitted for a co	orporation organized	507.1508, or 617.1508, Flo d under the laws of the Sta d agent, or both, in the Sta	_{ite of} Michigan	
1. The name of t	he corporation: Polar	is Home Fund	ling Corp.		
2. The principal	office address: 0-185	44th Street SW,	Suite 2, Grandville, M	MI 49418	
3. The mailing a	ddress (if different):				
4. Date of incorp	oration/qualification: _	04/23/2001	Document number:	F060000043	16
	I street address of the cu tment of State: (If resign		at and registered office on	file with the	
	NRAI Services, Inc	c			
	2731 Executive Pa	art Dr., Suite 4		-	
	Weston, FL 33331			2009 DI SECT	:: ->X q 447 q
6. The name and (if changed):	I street address of the ne	w registered agent (i	if changed) and /or register	2009 OCT 19 ATT SECRETARY OF TALLAHASSEE. F	
	Duane D. Vander	Ark			
	5830 Jamila River			FLORIDE	ડે ડે
	Venice, FL 34293	P.O. Box NOT ac	ceptable	<i>P</i> .	
The street addre	ess of its registered offices be identical.	ce and the street ad	dress of the business offic	ce of its registered a	gent,
			y its board of directors or ied in writing of the chan		
Signatu	re of an officer or director		Duane D. Vande Printed or typed nar		_
I further agree to of my duties, an document is bei	the appointment as reg to comply with the prov d I am familiar with an no filed merely to refle s been notified in writin	visions of all statute ad accept the obliga ct a change in the r	ngree to act in this capaci is relative to the proper a ition of my position as ref egistered office address,	ity, nd complete perforn gistered agent. Or, l I hereby confirm tha	iance if this it the
Sig	nature of Registered Agent	-	October 15,	2009	
If signing on be	chalf of an entity:				
Duane ?	D. Vander Ar	<u>k</u>			

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

COVER LETTER

TO: Amendment Sect Division of Corpo	ion orations					
SUBJECT:	Polaris Home Fu	Inding Corp.				
		orporation				
DOCUMENT NUMBER	R:F06	000004316	··			
The enclosed Statement o	f Change of Registered Offic	e/Agent and fee are submit	ted for filing.			
Please return all correspon	ndence concerning this matter	r to the following:				
	Duane D. V	Vander Ark				
	Name of Co	ntact Person				
Polaris Home Funding Corp.						
	Firm/Co					
	O-185 44th Str	eet SW, Suite 2				
	O-165 44ti1 Stit					
		. •				
*************************************	Grandville	, MI 49418				
	City/State a	nd Zip Code				
	duka@nala	riahfa aam				
F-ma	duke@pola il address: (to be used for f	uture annual report notif	ication)			
L-ma	ii address. (to be ased for t	diare aimaai report nom	ication)			
For further information co	oncerning this matter, please	call:				
Duane [). Vander Ark	at (616 \	667-9000			
	Contact Person	at (616) Area Code & Daytin	me Telephone Number			
Enclosed is a \$35.00 chec	ck made payable to the Depar	tment of State.				
1	Mailing Address:	Street Address:				
	Amendment Section	Amendment Se				
	Division of Corporations P.O. Box 6327	Division of Co	-			
	Fallahassee, FL 32314	Clifton Buildin	ng e Center Circle			
	ananassee, 1 L 32314	Tallahassee, F				
		a difficultions Co. 1.	- J-JUI			

TO: