

4/5/2021

Division of Corporations

M210000232

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H21000134530 3))



H210001345303ABCT

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Fax Number : (850)617-6383

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Account Number : 105256001620
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Email Address: lposin@americatrustfunding.com

2021 APR -5 PM 1:10

2021 APR -5 AM 10:15

LLC REGISTERED AGENT CHANGE
AMERICA TRUST FUNDING-MORTGAGE BANKERS, LLC

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APR -6 2021

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: AMERICA TRUST FUNDING-MORTGAGE BANKERS, LLC

2. (a) 5912 Hubbard Drive (b) 5912 Hubbard Drive

Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

Rockville, Maryland 20852 Rockville, Maryland 20852

2/26/2021 M21000002325

3. Date of filing registration in Florida 4. Document number

5. (a) MACHADO, EUDES Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 5600 N. FLAGLER DR., APT 2610 WEST PALM BEACH, FL 33407

(b) Business Filings Incorporated Enter name of NEW Registered Agent and/or NEW Registered Office address:

1200 South Pine Island Road NEW Registered Office Address: Plantation, FL 33324

2021 APR -5 AM 10:15

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of member or authorized representative of a member Lenita Posin, Member Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent Mark Williams, AVP, Business Filings Incorporated

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

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