## Commonwealth of Kentucky Michael G. Adams, Secretary of State

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

# Certificate of Withdrawal of Assumed Name

te Nichael G. Adams Secretary of State Received and Filed 3/11/2025 12:56:32 PM Fee receipt: \$20

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## CWA

Pursuant to the provisions of KRS 365, the undersigned applicant applies to withdraw an assumed name and, for that purpose, submits the following statements:

1. The assumed name is:

## MORTGAGE SERVICE CENTER

2. The assumed name has been discontinued by

### PHH MORTGAGE CORPORATION

- 3. This filing will be effective on Tuesday, March 11, 2025.
- 4. The date the original certificate was filed:

### Thursday, September 22, 2011

5. The mailing address of the entity's principal office is

### 1 MORTGAGE WAY MAIL STOP LIC, MOUNT LAUREL, NJ 08054

I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.

Signature of individual signing on behalf of **EVP**, **Director** : **Jenna D Evans** 3/11/2025 12:56:32 PM