	l.		0557	973.06	mmoore POC
Filing Fee: Section 1: \$10.00 Section 2: \$10.00 Section 1 & 2:	Commonwealth of Kentucky Michael G. Adams, Secretary of State			Michael G. Adams Kentucky Secretary of State Received and Filed: 12/11/2024 1:05 PM	
\$20.00 Michael G.	dams	Statement of Change of		ceipt: \$10.00	
Secretary of State P. O. Box 718		Principal Office Address		RAC	
Frankfort, KY 40602-0718 (502) 564-3490		Registered Agent and/or		POC	
http://www.sos.ky.gov Pursuant to the provisions of P		Registered Office Address KRS 14A and KRS 271B, 273, 274, 275,362, or 386,	. the und	lersianed	
hereby applies to change one or all of the following: principal office address, registered agent, resistered					

office address on behalf of

THE MORTGAGE WAREHOUSE,LLC

which is organized in the state of Kentucky, and for that purpose submits the following:

PARKER COMMONS BLVD.		
PARKER COMMONS BLVD.		
UNIT 103		
14ERS, FL 33912		
O F		

2. Registered agent currently on file	Registered agent is hereby changed to:				
JENNIFER KEANE MCKINNEY	NATIONAL REGISTERED AGENTS, INC. Name				
3	I consent to serve as the registered agent on behalf of the business entity.				
	Sgnature				

Registered office address currently on file	Registered office is hereby changed to (must be a Kentucky street address):			
2011 LAKE POINT WAY SUITE 101	306 W. MAIN STREET SUITE 512			
LOUISVILLE, KY 40223	FRANKPORT, KY 40601			

The fees for changing one or all of the following: Section 1 is \$10. Section 2 is \$10. Section 1 and 2 is \$20

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and

correct. Signature of Authorized Agent

JOHN SCOTT RILEY Printed Name

12/11/2024 Date

SOC (01/2011)