699077

(Requestor's Name)		
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	e #)
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" ATTORNEYS' TITLE INSURANCE FUND

6545 Corporate Centre Blvd., Suite 200 Orlando, FL 32822

COVER LETTER

Date:

October 25, 2015

To:

Amendment Section

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Entity:

Attorneys' Title Insurance Fund, a Florida business trust

Document#: 699077

The enclosed Statement of Change of Registered Office and/or Registered Agent together with the applicable fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John H. Simmons

Attorneys' Title Insurance Fund

6545 Corporate Centre Blvd., Suite 200

Orlando, FL 32822

Coordinator@ATIF.com

For further information concerning this matter, please call:

John H. Simmons

(855) 730-4700

Enclosed is a \$35.00 check made payable to the Department of State.

John H. Simmons

President & Executive Secretary

STATEMENT OF CHANGE OF REGISTERED OFFICE AND/OR REGISTERED AGENT FOR BUSINESS TRUST

This statement of change is submitted for a Business Trust organized under the laws of the State of Florida in order to change its registered office and/or registered agent in the State of Florida.

1. The name of the Business Trust: Attorneys' Title Insurance Fund

2. The principal office address: 6545 Corporate Centre Blvd., Suite 200

Orlando, FL 32822

3. The mailing address: (same as above)

4. Date of Qualification: 03/22/1947

5. Document number: 699077

6. Former Registered Agent/Office: R.F. MacConnell (resigned on 10/23/2015):

6545 Corporate Centre Blvd., Suite 200

Orlando, FL 32822

7. New Registered Agent/Office: John H. Simmons

6545 Corporate Centre Blvd., Suite 200

Orlando, FL 32822

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such chapge was authorized by the undersigned officer so authorized by the Board.

John H. Simmons

President & Executive Secretary

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 obligation of my position as registered agent.

Date: 10/25/2015

John H. Simmons

Registered Agent