## 4000043049

| (Requestor's Name)                      |  |  |  |  |  |
|---|--|--|--|--|--|
| (Address)                               |  |  |  |  |  |
| (Address)                               |  |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |  |
|   |  |  |  |  |  |
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SECHET/R/ OF STATE TALLAHASSEE, FLORIDA

THUM I - ACM

## TRANSMITTAL LETTER

| TO: Registration Section Division of Corporations   |              |           |         |
|---|--------------|-----------|---------|
| SUBJECT: FRAT PRIORITY TITLE LLC. (Name of Limited Liability Company)                       |              |           |         |
|   |              |           |         |
| The enclosed Articles of Amendment and fee(s) are submitted for filing.                     |              |           |         |
| Please return all correspondence concerning this matter to the following:                   |              |           |         |
|   |              |           |         |
| JANINE M. Scola   |              |           |         |
| (Name of Person)  |              |           |         |
| FIRST PRIORITY TITLE LLC.   |              |           |         |
| (Firm/Company)  |              |           |         |
| 8140 College Physkway # 1038 + 104 B  | _            |           |         |
| (Address)   |              |           |         |
| FT Myers fl. 33919<br>(City/State and Zip Code)   | 5500         | <b>9</b>  |         |
| (City/State and Zip Code)   | EC<br>A      | 6         | -       |
| For further information concerning this matter, please call:                                | SSA<br>FINAL | 1- 404 TE | <u></u> |
| Pil Sada Cui  | FFG.         |           |         |
| (Name of Person) at (GUI) CBG-G113  (Name of Person) (Area Code & Daytime Telephone Number) | ) <u>H</u>   | MII: 45   |         |
|   | 렇다           | 5         |         |

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

330.00 Filing Fee & Certificate of Status S55.00 Filing Fee & Certified Copy (additional copy is enclosed) O \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| FIRST PRIORITY                      | Title                     | LLC. |  |
|-------------------------------------|---------------------------|------|--|
| (Present N<br>(A Florida Limited Li | Name)<br>ability Company) |      |  |
|                                     |                           |      |  |

FIRST: The Articles of Organization were filed on Jung 18 2004 and assigned document number Loyocousous

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

- TRANCIS P. SCOLA, 1765 W. MCLRICCH AND PULTA GORDA #1 33950
  AND TRACY HENRY, 623 SE 29TH FERR. CAPECORNI FI 33904
  ARE REMOVED AS MANAGERS AND ARE TO be REPLACED by
  TAXINE NI. SCOLA 1765 W. MARION AVE, PLINTA GORDA #1. 33950
- (2) The New Address is \$140 College Parkway

  Unit # 1038 + 1048

  RT myers R1 33919

SECHETARY OF STATE

| Dated | 10-25   | , 2004                                       |   |
|-------|---------|--|---|
|       |         |  |   |
|       |         | A Coulet                                     |   |
|       | Signatu | e of a intember or authorized representative | of a member                             |
|       |         | Femuris P. Scola                             |   |
|       |         | Typed or printed name of signee              | • |

Filing Fee: \$25.00