

L06000008373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

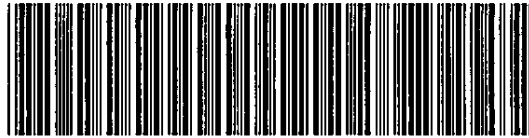
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FLAT FEE CLOSING SERVICES, 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:

Carlos Gil  
(Name of Person)

Carlos A. Gil, PA  
(Firm/Company)

3910 West Flagler Street  
(Address)

MIAMI, FL 33134  
(City/State and Zip Code)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Carlos Gil at 305, 443-2525  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:



\$25.00 Filing Fee



\$30.00 Filing Fee &  
Certificate of Status



\$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)



\$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

MAILING ADDRESS:  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32301

STREET/COURIER ADDRESS:  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FLAT Fee Closing Services, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 1/24/2006 and assigned document number LO60000008373.

**SECOND:** This amendment is submitted to amend the following:

PLEASE change name ~~to~~ From  
FLAT Fee Closing Services, LLC  
TO  
FLAT Fee TITLE Services, LLC

**FILED**  
2007 JAN 25 P 3:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dated 1/19/07, \_\_\_\_\_

Carlo Gil  
Signature of a member or authorized representative of a member

CARLOS Gil  
Typed or printed name of signer