L11000058782

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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

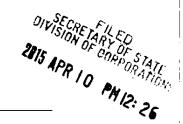
TO:	Registration Sec Division of Corp		*		
CHELE	Title Hous	se, LLC			
Name of Limited Liability Company					
The end	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspor	dence concerning this matter	to the following:		
		David Lopez			
			Name of Person		
		Title House, LLC			
			Firm/Company		
		9144 Forrest Hill Blv	∕d.		
			Address		
		Wellington, FL 3341	1		
			City/State and Zip Code		
		E-mail address: (to be used for future annual report notifi	cation)	
For fur	ther information co	ncerning this matter, please c	all:		
David	d Lopez		561 964-9566		
	Name of	Person	Area Code Daytime	Telephone Number	
Enclose	ed is a check for the	e following amount:			
■ \$25	5.00 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 32314 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



Title House, LLC

(Name of the Limited Liability Company as it now appears on our records.)

The Articles of Organization for this Limited Liability Company Florida document number <u>L11000058782</u>	were filed on 05/18/2011 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	9144 Forrest Hill Blvd.
(Principal office address MUST BE A STREET ADDRESS)	Wellington, FL 33411
Enter new mailing address, if applicable:	9144 Forrest Hill Blvd.
(Mailing address MAY BE A POST OFFICE BOX)	Wellington, FL 33411
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	<u>e</u> :
	Enter Florida street uddress
<u> </u>	, Florida
Nam Begistered America Company of the site	City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member **Title Type of Action Name Address** Alexander B. Rotbart **MGR** 111 E. Palmetto Park Road □ Add Boca Raton, FL 33432 ■ Remove □ Add □ Remove □ Add ☐ Remove □ Add ☐ Remove □ Add ☐ Remove

_□ Add

_□ Remove

[f amendi	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	•
The effectiv	date, if other than the date of filing:
	Signature of a member or authorized representative of a member
	Alexander B. Rotbart
	Typed or printed name of signee

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Filing Fee: \$25.00