

U6000158114

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 8, 2017

RICHARD J ADAMS  
CENTURION TITLE SERVICES, LLC  
6500 COWPEN ROAD STE 101  
MIAMI LAKES, FL 33014

SUBJECT: CENTURION TITLE SERVICES, LLC  
Ref. Number: L16000158114

2017 FEB 16 PM 4:10  
TALLAHASSEE, FLORIDA

We have received your document for CENTURION TITLE SERVICES, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

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SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
17 FEB -6 AM 11:17

Shelia H Young  
Regulatory Specialist II

Letter Number: 017A00002593

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Centurion Title Services, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Richard J. Adams  
Name of Person

Centurion Title Services, LLC  
Firm/Company

6500 Couper Rd #101  
Address

Miami Lakes FL 33014  
City/State and Zip Code

radamslaw@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard Adams at ( 305 ) 824-9800  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Centurion Title Services, LLC
2. (a) 6500 Cowper Road, Suite 202 (b) 6500 Cowper Road, Suite 101  
 Principal office address of limited liability company: Mailing address of limited liability company:  
 (Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)
- Miami Lakes, FL 33014 Miami Lakes, FL 33014

3. 08/23/2016 Date of filing/registration in Florida 4. L16000158114 Document number

5. (a) Lydia C. Quesada, Esq.  
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

6500 Cowper Road, Suite 101  
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Miami Lakes, FL 33014

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- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

6500 Cowper Road, Suite 202  
**NEW Registered Office Address:**

Miami Lakes, FL 33014

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating-agreement of the limited liability company.

[Signature] Signature of a member or authorized representative of a member Richard J. Adams manager Printed or typed name of signee

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.

[Signature] Signature of Registered Agent