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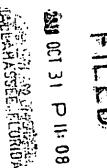
(Requestor's Name)
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COVER LETTER

τo:

Registration Section

Division of Cor	porations		
Investment	Trust Title, LLC		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter		
rease return an correspo	machee concerning and maker	to the following.	
	Lisette M Hernandez		
		Name of Person	
	Investment Trust Title, LL	.C	OCI 31 PII: 08
		Firm/Company	<u> </u>
	14125 NW 80 Avenue, Su	ite 202	
		Address	
	Miami Lakes, FL 33016		
		City/State and Zip Code	4.
	lucy@investmenttrusttitle.c	om to be used for future annual report noti	
For further information c	oncerning this matter, please c	·	исаноп)
Lisette M Hernandez		305 798-0899	
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne 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)
	ING ADDRESS:	STREET/COURI Registration Section	
Divisio	on of Corporations	Division of Corpor	
	ox 6327 issee, FL 32314	Clifton Building 2661 Executive Co	enter Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Investment Trust Title, LLC					
(Name of the Lim	ited Liability Compa (A Florida Limited	iny as it now appears Liability Company)	on our records.)		
he Articles of Organization for this Limited I	Liability Company	were filed on $\frac{03/0}{}$	01/2018	and ass	signed
lorida document number _L13000032582	·				
his amendment is submitted to amend the fol	lowing:				
a. If amending name, enter the new name of	of the limited liab	oility company her	<u>·e</u> :		
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the des	signation "LLC" c	or the libreviation 1.	LCVI
nter new principal offices address, if appli	cable:			- π ση 11 ω	
Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>				
nter new mailing address, if applicable:		14125 NW 80 Av	renue	000	
Mailing address MAY BE A POST OFFICE BOX)		Suite 202			
		Miami Lakes, FL	. 33016		
B. If amending the registered agent and egistered agent and/or the new registered of			our records,	enter the name	of the ne
Name of New Registered Agent:	Lisette M Hern	andez			
New Registered Office Address:	14125 NW 80	Avenue, Suite 202			
		Enter Floric	la street address		
	Miami Lakes		Flori	ida	
		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.

16. hanging Registered Agent, Signature of New Registered Agent

' If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ERNESTO GARCIA		Add
		2423 SW 147 AVE, SUITE 123 MIAMI, FL 33185	■ Remove
			☐ Change
AMBR	ERNESTO GARCIA		Add
		2423 SW 147 AVE, SUITE 123 MIAMI, FL 33185	■ Remove
			☐ Change
MGR	LISETTE M HERNANDEZ	14125 NW 80 AVE, SUITE 202 MIAMI LAKES, FL 33016	■ Add
			☐ Remove
			Change
AMBR	LISETTE M HERNANDEZ	14125 NW 80 AVE, SUITE 202 MIAMI LAKES, FL 33016	Add
			Repove W
			Remove
			Change
			☐ Remove
			☐ Change

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		5 6
f an effective date is listed, the da Note: If the date inserted in t	n the date of filing: 10/26/2018 the must be specific and cannot be prior to date of filing or this block does not meet the applicable statutory filing the Department of State's records.	
ne record specifies a del The 90th day after the	layed effective date, but not an effective e record is filed.	time, at 12:01 a.m. on the earlier of
Dated	2018	
A-	·	
	Signature of a member or authorized representativ	<u> </u>

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00