## I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: THOMAS G SHERMAN

Electronic Signature of Signing Officer/Director Detail

## Entity Name: UNION TITLE SERVICES, INC. **Current Principal Place of Business:**

90 ALMERIA AVENUE CORAL GABLES, FL 33134

### **Current Mailing Address:**

90 ALMERIA AVENUE CORAL GABLES. FL 33134

### FEI Number: 59-2499757

# Name and Address of Current Registered Agent:

SHERMAN, THOMAS G 90 ALMERIA AVE CORAL GABLES, FL 33134 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

Electronic Signature of Registered Agent

### **Officer/Director Detail :**

Title	PD	Title	VD
Name	SHERMAN, THOMAS G	Name	SHERMAN, SILMA C
Address	90 ALMERIA AVE.	Address	90 ALMERIA AVE.
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134

Jan 04, 2023 4131692792CC

Certificate of Status Desired: No

Date

PRESIDENT

01/04/2023

#### 2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT DOCUMENT# M10461

Date

FILED Secretary of State