259960

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
(Excument Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Office Use Only		



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JAN 1 3 2020 S. YOUNG





CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: December 6, 2019

Order#: 076958/076

Re: COLUMBIA TITLE OF FLORIDA INC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35__.

Please take the following action:

XX ___ File in your office on a routine basis.

XX Issue Proof of Filing.

XX_ Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporatio	617.0502, 607.1508, or 617.1508, Florida Statutes, this on organized under the laws of the State of Florida or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: COLUMBIA TITI	LE OF FLORIDA INC
2. The principal	office address: 201 Alhambra C	ircle, Suite 1060, Coral Gables, FL 33134
3. The mailing a 55401	ddress (if different): Attn: Lega	I Department, 333 South 7th Street, 27th Floor, Minneapolis, MN
4. Date of incorp	poration/qualification: 06/14/196	Document number: 259960
5. The name and		istered agent and registered office on file with the
	C T Corporation System	
	1200 South Pine Island Road	72 A 10
	Plantation	FL 33324
6. The name and (if changed):	I street address of the new registe	ered agent (if changed) and /or registered office
	Corporation Service Company	
	1201 Hays Street	···
		Box NOT acceptable
	Tallahassee	FL 32301
The street address changed will	ess of its registered office and the be identical.	e street address of the business office of its registered agent.
Such change wa authorized by th	s authorized by resolution duly ne board, or the corporation has	adopted by its board of directors or by an officer so been notified in writing of the change.
Xiel	E. alnie	Jill Cilmi, Vice President
Signatu	re of an officer or director	Printed or typed name and title
I further agree to performance of agent. Or, if the hereby confirm	to comply with the provisions of my duties, and I am familiar wi	igent and agree to act in this capacity. I all statutes relative to the proper and complete th and accept the obligation of my position as registered by to reflect a change in the registered office address. I botified in writing of this change.
By:	ennley	12/06/2019 Date
_	nature of Registered Agent half of an entity:	17AIC
Ami M. Casper.	, Asst. Vice President	
	vped or Printed Name	_

* * * FILING FEE: \$35.00 * * *