## 654679

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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OK TO FILE PS 7/16/04

July 7, 2004

Florida Department of State Division of Corporations 409 E. Gaines Street Tallahassee FL 32399

Re: Consent to use of name: Ticor Title Insurance Company of Florida

Ticor Title Insurance Company hereby gives its consent to American Pioneer Title Insurance Company, an affiliate of Ticor Title Insurance Company, to use the name Ticor Title Insurance Company of Florida and to file Articles of Amendment with the Florida Department of State showing the name change to Ticor Title Insurance Company of Florida.

Very truly yours,

Marjorie Nemzura
Vice President

312-223-4552 (phone)

312-223-5912 (fax)

## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: America	can Pioneer Title Insurance Col	mpany	
DOCUMENT NU	IMRED: 654679		
DOCUMENT NO	WIDER,		
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	
Please return all co	orrespondence concerning thi	s matter to the following:	
Marj	orie Nemzura		
	(Na	ame of Person)	
Ame	rican Pioneer		. <u>.                                   </u>
	(Name o	of Firm/ Company)	
171	N. Clark Street 8th Floor		
		(Address)	
Chic	ago IL 60601-3294		
	(City/ So	ate/ and Zip Code)	
For further information	ation concerning this matter,	please call:	
Marjorie Nemzura		at ( 312 ) 223-4552	
	(Name of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a chec	k for the following amount:		
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399	

## FILED

Articles of Amendment to Articles of Incorporation of

04 JUL -8 AM 10: 23

TALLAHASSEE, FLORIDA

TALLAHASSEE.FLUKI American Pioneer Title Insurance Company
(Name of corporation as currently filed with the Florida Dept. of State)
654679
(Document number of corporation (if known)
(Bootment named) of corporation (if Known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
Ticor Title Insurance Company of Florida
(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: April 27, 2004
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval by
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Eileen W. Van Roeyen  (Typed or printed name of person signing)
Vice President (Title of person signing)
(Title of person signing)

FILING FEE: \$35