

A97000001106

## Memorandum

To: Florida Dept of State  
From: Melinda Thompson  
Date: 01/28/99  
Re: Certificate of Limited Partnership

Enclosed with this memo is the executed Certificate of Amendment to Limited Partnership along with the Statement of Change and a check in the amount of \$87.50.

I will be the contact person and any correspondence can be mailed to my attention at: Security First Title, 1715 N. Westshore Blvd, Suite 990, Tampa, FL 33607. You may contact me during the day at 1-813-282-8414.

The Acknowledgment should be addressed to Alan Greber, Security First Title, 1715 N. Westshore Blvd, Ste 990, Tampa, FL 33607.

Feel free to call with questions. Thank you for your time and help.

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99 FEB - 1 8:30  
SECURITY FIRST  
TITLE  
FLORIDA

800002768698--1  
-02/01/99--01101--011  
\*\*\*\*\*87.50 \*\*\*\*\*35.00

*Ra change*

Name Availability	
Document Examiner	DCC
Updater	DCC
Verifier	DCC
Acknowledgement	DCC
W. P. Verifier	DCC

C. TAX \_\_\_\_\_  
FILING \_\_\_\_\_ 35.00  
L. AGENT FEE \_\_\_\_\_  
C. \_\_\_\_\_  
T. \_\_\_\_\_  
N. \_\_\_\_\_  
BALANCE DUE \_\_\_\_\_  
REFUND \_\_\_\_\_

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**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED  
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Martin County Title Insurance Agency, Ltd.  
Name of the limited partnership

2. 5-19-97 3. A97000001106  
Date of filing/registration in Florida Document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

John T. LaJoie  
Name  
2075 Centre Pointe Blvd.  
Address  
Tallahassee, FL 32308  
City, State and Zip

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5. The name and address of the new registered agent and/or office:

The Security First Title Affiliates, Inc.  
Name  
1715 N. Westshore Blvd., Suite 150  
Florida street address (P.O. Box not acceptable)  
Tampa, FL 33607  
City, State and Zip

6. Such change(s) was/were authorized by the general partners.  
**Security First Title Affiliates, Inc.**

By: See Below  
Signature of General Partner

**Alan S. Greber, President**

*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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.*

**The Security First Title Affiliates, Inc.**

By: Alan S. Greber, Pres  
Signature of Registered Agent

**Alan S. Greber, President**  
*and General Partner*

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
Filing Fee: \$35.00