

DI8000000040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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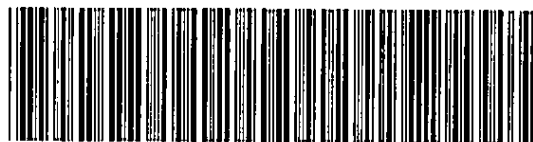
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FAIR TITLING TRUST

**DOCUMENT NUMBER:** D18000000040

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Castillo

Name of Contact Person

Registered Agent Solutions, Inc.

Firm/Company

5301 Southwest Pkwy Suite 400

Address

Austin, TX 78735

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Castillo

Name of Contact Person

at ( 888 )

705-7274

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

## STATEMENT OF CHANGE OF REGISTERED AGENT

Pursuant to the provisions of Chapter 609 Common-Law Declarations Of Trust, Florida Statutes, this statement of change is submitted for a Trust organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the Trust : FAIR TITLING TRUST
2. The principal office address: 1540 2ND ST #200  
SANTA MONICA, CA 90401-3513
3. The mailing address (if different):
4. Date of incorporation/qualification: 08/23/2018 Document number: D18000000040
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

C T CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

PLANTATION, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office: (if changed):

Registered Agent Solutions, Inc.

155 Office Plaza Dr. Suite A

P.O. Box NOT acceptable

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of trustee/trustees so authorized by the board, or the trust has been notified in writing of the change.

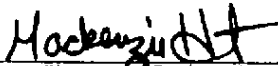
/s/ Roberto S. Feito

Signature of Trustee

Roberto S. Feito, Trust Administrator

Printed or typed name and title

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 obligation 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 trust has been notified in writing of this change.



Signature of Registered Agent

10/11/2022

Date

If signing on behalf of an entity:

Mackenzie Hart, Assistant Secretary

Typed or Printed Name

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