## F040000002795

•
(Requestor's Name)
(Address)
(Address)
( tauloss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
· [2]
Special Instructions to Filing Officer:

Office Use Only



300116659703

Charge



NUT 1871-16ED TO ACKNOWLEDGE OFFICIENCY OF FILING RECEIVED
DEPARTMENT OF STATE
VISION OF CORPORATION

3/3/08



SERVICE COMPAN	<b>y.</b>			
<b>€</b> ^	ACCOUNT NO.	:	072100	000032
	REFERENCE	:	462074	5163472
	AUTHORIZATION	:		
<b></b>	COST LIMIT	:	\$ 35	Spelle
DER DATE :	February 27, 200	8		
RDER TIME :	9:27 AM			
RDER NO. :	462074-080			
JSTOMER NO:	5163472			
NAME:	CHANGE OF A			
LEASE RETURN	THE FOLLOWING AS	PR	OOF OF I	FILING:

EXAMINER'S INITIALS:

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

statement of cha	ange is submitted for	r a corporation organ	2, 607.1508, or 617.1508 ized under the laws of the cred agent, or both, in the	State of _	Ohio	this	_
1. The name of	the corporation: TI	ITLE FIRST AG	ENCY, INC.				
	office address:						
555 Sout	h Front Street,	Suite 400, Colun	nbus, OH 43215				
•	address (if different) at Town Street,	): Columbus, Oh 4	<del>1</del> 3215				
4. Date of incor	poration/qualification	on: 05/13/2004	Document number:	F04000	0027	95	
5. The name and			gent and registered office				
	C T Corporati	ion System					
	1200 S. Pine I	Island Road					
	Plantation, FI	L 33324		•	TAL 38	2008	
6. The name and (if changed):	d street address of th	ne new registered agen	it (if changed) and /or regi	istered offic	CRETARY	2008 MAR -3	FILE
	Corporation S	Service Company	7		E C	PH	[1]
	1201 Hays Str	reet			STAT	က္	
		(P.O. Box NOT acceptable)			<u>o</u> m		
	Tallahassee, F	FL 32301					
The street address changed will	ess of its registered be identical.	office and the street	address of the business of	office of its	registe	ered ag	ent,
Such change wa authorized by the	as authorized by re he board, or the cor	solution duly adopted rporation has been no	l by its board of directors tified in writing of the ch	s or by an on an ange.	officer	so	
Than	Cerllen		Maureen Cullen,	-		act	
(Signati I hereby accept I further agree of my duties, an document is bei corporation has	ure of an officer or director the appointment as to comply with the ad I am familiar with ing filed merely the s been notified if w tion Service Co	s registered agent and provisions of all state in and accept the oblive feet a change in the oriting of this change.	d agree to act in this cap utes relative to the prope gation of my position as e registered office addre.		•	erforme Or, if m that	ince this the
By:	Shur!		February 19, 200	·	<u>-</u>		_
If signing on be	gnature of Registered Ages chalf of an entity:	Harry B. Davi		ite)			
τ,	. , p = 0. 1						

Make Checks Payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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