F0600000101

| (Red | questor's Name) | | | |
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| (Add | dress) | | | |
| (Add | dress) | | | |
| (Cit | y/State/Zip/Phone | ; #) | | |
| PICK-UP | WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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02/27/14--01022--002 **35.00

14 FEB 27 PH 1: 49
SECRETARY OF STATE
AND STATE OF STATE
SECRETARY OF

FEB 2.7 2014 C. CARROTHERS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard llockar2@cscinfo.com

Date: February 25, 2014

Order#: 985813-006

Re: RES/TITLE, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Lockard

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

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

QUCA.XCOA

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

| statement of cha | provisions of sections 607.0502, 617.05 ange is submitted for a corporation orga er to change its registered office or regis | nized under the laws of the State o | f <u>RI</u> | | |
|---|---|--|----------------------------|--|--|
| 1. The name of | the corporation: RES/TITLE, INC. | | | | |
| | office address: CENTER BLVD. SUITE 4, WARWICK | | | | |
| 3. The mailing a | address (if different): | | | | |
| 4. Date of incor | poration/qualification: 02/20/2006 | Document number: F06000 | 0001101 | | |
| | d street address of the current registered rtment of State: (If resigned, enter resign | - | with the | | |
| | NRAI SERVICES, INC. | | _ | | |
| | 1200 SOUTH PINE ISLAND ROAD | | | | |
| | Plantation | FL 33324 | | | |
| 6. The name and (if changed): | d street address of the new registered age | ent (if changed) and /or registered of | office | | |
| | Corporation Service Company | | - 7.S | | |
| | 1201 Hays Street | | | | |
| | P.O. Box NO Tallahassee | Tacceptable FL 32301 | S B | | |
| The street addre | ess of its registered office and the street be identical. | | its registere Pagent, | | |
| Such change wa authorized by th | as authorized by resolution duly adopte ne board, or the corporation has been no | d by its board of directors or by a otified in writing of the change. | officer so | | |
| Day | | Dona Priebe, Vice President | 02/12/2014 | | |
| I hereby accept I further agree performance of agent. Or, if the hereby confirm | the appointment as registered agent ar to comply with the provisions of all stat my duties, and I am familiar with and is is document is being filed merely to ref that the corporation has been notified in Service Company | tutes relative to the proper and co accept the obligation of my position lect a change in the registered off | mplete on as registered | | |
| By: Dra | nature of Registered Agent | 02/12/2014 Date | | | |
| _ | half of an entity: | Date | | | |
| Grace E. Kirby, | Assistant Vice President | | | | |
| | yped or Printed Name | | | | |

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