# F10000005069

(Re	questor's Name)	<del></del>
(Ad	dress)	
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(Cit	ty/State/Zip/Phone #	9)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer	//
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SECRETARY OF STATE
AND AMASSEE FLORID.

NC Mewis 6-29-11

Division of Corporations				
SUBJECT: Liberty Wateral J (Name of Co.)  DOCUMENT NUMBER: 20-324	orporation) 3916			
The enclosed Amendment and fee are submitted for filing.				
	•			
Please return all correspondence concerning this  (Name of Contact Person)				
Wedy Natural Fitte (Firm/Company)	<del></del>			
(Address)	·			
HICKSule W 1801 (City/State and Zip Code)				
For further information concerning this matter, p	please call:			
Potricia Stein at (Name of Contact Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
\$35.00 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)			
Amendment Section Am Division of Corporations Div P.O. Box 6327 Clir	eet Address: endment Section ision of Corporations fron Building 1 Executive Center Circle			

Tallahassee, FL 32301

## LIBERTY NATIONAL TITLE AGENCY, CORP.

21 Holman Boulevard Hicksville, NY 11801 Tel (516) 203-7310 Fax (516) 596-8658

June 7, 2011

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Please see attached executed name change forms, filing receipt and check (1884) in the amount of \$35.00.

If you have any questions please do not hesitate to contact the below. Thank you.

Sincerely.

Patricia Stein President

Liberty National Title



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 14, 2011

PATRICIA STEIN LIBERTY NATIONAL TITLE AGENCY, CORP. 21 HOLMAN BLVD. HICKSVILLE, NY 11801

SUBJECT: NY LIBERTY ABSTRACT SERVICES CORP.

Ref. Number: F1000005069

We have received your document for NY LIBERTY ABSTRACT SERVICES CORP. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 811A00014519

11 JUN 28 PH 12: 51
ECRETARY OF STATE

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# PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)
F1000005069  (Document number of corporation (if known)
1. Why Liberty Abolycust Senses Con- (Name of corporation as it appears of the records of the Department of State)
2. New lork (Incorporated under laws of)  3. (Date authorized to do business in Florida)
SECTION II (4-7 COMPLETE ONLY THE APPLICABLE CHANGES)
4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation?  5 10 11  5 100 11
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)
(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
o. If the amendment changes the period of duration, indicate new period of duration.
(New duration)  7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.
(New jurisdiction)
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  TOSIUM
(Typed or printed name of person signing) (Title of person signing)

.y., 1. S. DEPARTMENT OF STATE DIVISION OF CORPORATIONS AND STATE RECORDS

ALBANY, NY 12231-0001

### FILING RECEIPT

"ENTITY NAME: LIBERTY NATIONAL TITLE AGENCY CORP.

DOCUMENT TYPE: AMENDMENT (DOMESTIC BUSINESS)

PROCESS NAME

COUNTY: NASS

FILED: 05/10/2011 DURATION: \*\*\*\*\*\*\* CASH#: 110510000964 FILM #: 110510000906

FILER:

PATRICIA STEIN 21 HOLMAN BLVD.

HICKSVILLE, NY 11801

ADDRESS FOR PROCESS: 

THE CORPORATION 21 HOLMAN BLVD.

HICKSVILLE, NY 11801

REGISTERED AGENT:

SERVICE CODE: 14 SERVICE COMPANY: GERALD WEINBERG, INC. - 14

FEES	85.00	PAYMENTS	85.00
FILING TAX CERT COPIES HANDLING	60.00 0.00 0.00 0.00 25.00	CASH CHECK CHARGE DRAWDOWN OPAL REFUND DOS-1025	0.00 0.00 0.00 85.00 0.00 0.00 (04/2007)