

F14000000975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

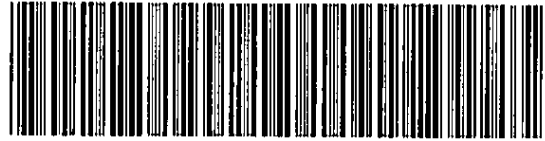
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/05/19--01004--005 **70.00

Ra Chang

19 AUG -2 PM 2:30

Ms. [illegible]
[illegible]

AUG 07 2019

R. CUSHING

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 87 Glinda

☐ **CERTIFIED COPY**

☒ **PHOTOCOPY**

☐ **CUS**

☒ **FILING**

RA change

1. **GREATER ILLINOIS TITLE SERVICES, INC.**

(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Greater Illinois Title Services, Inc. dba GIT Florida Title Services
Name of Corporation

DOCUMENT NUMBER: F14000000975

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:

Kylie E. Conrad
Name of Contact Person

Corp1, Inc.
Firm/Company

28 Old Rudnick Lane
Address

Dover DE 19901
City/State and Zip Code

orders@corp1.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kylie E. Conrad at (720) 644.6144
Name of Contact Person Area Code & Daytime Telephone Number

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

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

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Illinois,
USA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Greater Illinois Title Company, Inc.
2. The principal office address: 120 N. LaSalle Street, Suite 900
Chicago, IL 60602
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/05/2014 Document number: F14000000975
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)

Kosin, Gregory Mark

236 E. 6th Avenue

Tallahassee, FL 32303

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

Corporate Access, Inc.

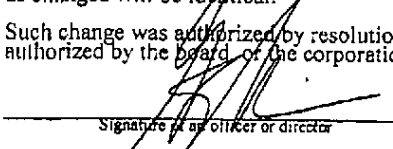
236 E. 6th Avenue

P.O. Box NOT acceptable

Tallahassee, FL 32303-6208

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 directors or by an officer so
authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Gregory M. Kosin, President

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 corporation has been notified in writing of this change.*


Signature of Registered Agent

8/2/19

Date

If signing on behalf of an entity:

Danny Bennett

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR212045 (03/12)

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