## 635376

(Re	equestor's Name)	
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
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& Amend



## **ALPHA-OMEGA TITLE**

THE FIRST & LAST NAME IN TITLE INSURANCE SERVING ALL OF FLORIDA SINCE 1983

Florida Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Phone: 850-245-6050

October 4, 2005

**RE:** Amendment of Information for

Alpha-Omega Title Services, Inc. Document Number G35376

To Whom It May Concern:

Please change the principal and mailing address of Alpha-Omega Title Services, Inc. with the correct suite number listed.

The previous principal address was: Alpha-Omega Title Services, Inc. 1700 S. MacDill Avenue, Suite 300 Tampa, FL 33629

Please revise the records to reflect our address with the correct suite number as follows:

Alpha-Omega Title Services, Inc. 1700 S. MacDill Avenue, Suite 300-A Tampa, FL 33629

Also, please make the following changes to the officer/director detail:

 Reflect the correct Suite # of Byron Gibbs Wilson, Jr. as follows: 1700 S. MacDill Avenue, Suite 300-A Tampa, FL 33629

 Reflect the new address of Lori Wilson as follows: 1700 S. MacDill Avenue, Suite 300-A Tampa, FL 33629

3. Remove Tracey Griffin as an officer of the company (see attached amendment).

Please also see the amendments attached. Thank you for your assistance in this matter.

Sincerely,

Byron Gibbs Wilson, Jr.

CEO

813-760-1434

SOUTH TAMPA:

1700 S. MacDill Ave., Suite 300, Tampa, FL 33629 Phone: (813) 254-4320 • Fax: (813) 254-6191 Kelly Presser, Cell (813) 810-9775

CARROLLWOOD:

NEW TAMPA:

8907 Regents Park Orive, Suite 390, Tampa, FL 33647 Phone: (813) 907-3396 • Fax: (813) 907-0928

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	Alpha-Omega Title 3	Services, Inc.
DOCUMENT NUMBER: _ G.	35376	
The enclosed Articles of Amendmen	at and fee are submitted for filing.	
Please return all correspondence con	cerning this matter to the following:	
<u> </u>	(Name of Contact Person)	<u> </u>
Alph	g - Omega Title Service (Firm/Company)	ces, Inc.
1700	5. Mac Dill Avenue,	Suite 300-A
_	Pa FL 33629 (City/ State and Zip Code)	
For further information concerning t	his matter, please call:	
Name of Contact Person)	at ( 8/3 ) 335 (Area Code & Daytime	-2958 Telephone Number)
Enclosed is a check for the following	g amount:	
\$35 Filing Fee \$43.75 Filing Certificate of		☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address  Amendment Section  Division of Corporations  P.O. Boy 6327	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of corporation as currently filed with the Florida Dept. of State)	
(Document number of corporation (if known)	□
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:  NEW CORPORATE NAME (if changing):	LED
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")	
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	
I. The principal and mailing address is:  Alpha-Omega Title Services, Inc.	
1700 5. Mac Dill Ave., Swite 300-A Tampa, FL 33629	
The Officer/Oircetor Detail is as follows:  A) 1700 5. Mar Dill Ave., 5-ite 300-A CEO  Tompa, 12 33629	
B) Lori D. Wilson 1700 5. Mac Dill Auc., Svite 300-A CFO Tauria, Fe 33629	
C) Tracey Griffin has resigned as VP-see attached  (Attach additional pages if necessary)	Acsignation
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	

(continued)

The date of each amendment(s) adoption: 9-30-05
Effective date if applicable: 9-30-05
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
Byron 6ibbs Wilson, JR.  (Typed or printed name of person signing)
(Typed or printed name of person signing)
Owner + CEO (Title of person signing)
(Title of person signing)

**FILING FEE: \$35**