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COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: <u>STANDAR</u>	DTITLE INSU	RANCE AGERCY, IN
	ER: <u>T&SS84</u>		
The enclosed Articles (of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
	KIRK GRAA	THAN	
-		Name of Contact Person	1
-		Firm/ Company	
-	1860 FORES	T HILL BL V Address	D., STE-105
-	WEST PALM	1 BE74-CH, I City/ State and Zip Cod	FL 33406.
-	K/KK & K/KK E-mail address: (to be us	GK141VT/1111111111111111111111111111111111	notification)
For further information	concerning this matter, pleas	se call:	
TERRY 1	MA	at (<u>570 (</u>	_) <u>948-2035</u> de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
1	the following amount made		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certified Copy
Ame Divis P.O.	ing Address adment Section alon of Corporations Box 6327 hassee, FL 32314	Amend Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

to

STITNOMED T	TITLE INSURT	TNCE AGENCY, ly filed with the Florida Dept.	1NC 2
(<u>Name o</u>	f Corporation as current	ly filed with the Florida Dept.	of Starging
	T2558	74	
	(Document Number of	PY of Corporation (if known)	工力 20 1
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, this	Florida Profit Corporation add	pts the following mentinent(s
A. If amending name, enter the new na	me of the corporation:		9:34 STATE
N/A	_		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co", or the abbreviation "P.A.	A professional corporation nat 	me must contain the word
B. Enter new principal office address, in (Principal office address MUST BE A ST		NIA	
C. Enter new mailing address, if application (Mailing address MAY BE A POST Control of May BE and the registered agent and new registered agent and/or the new Mame of New Registered Agent	<i>DFFICE BOX)</i> d/or registered office add r registered office addres		
	(Florida st	reet address)	
New Registered Office Address:			Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe	red agent Lam familiar		of the position.
	,		
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President: V= Vice President: T= Treasurer: S= Secretary; D= Director: TR= Trustee: C = Chairman or Clerk: CEO = Chief Executive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add,

X Change	<u>PT</u> <u>Je</u>	ohn Doe	
X Remove	<u>V</u> <u>M</u>	like Jones	
X Add	<u>SV</u> Sa	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u></u>	STEFAN SINN	2716 SOMERSET RD.
_X Add			LAKE WORTH, FL 3346
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			(-m) (-0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Add			
Remove			
6) Change			
Add			
Remove			

E. If amen	ding or adding additional Arti-	cles, enter change(s) he	<u>re</u> :	
	additional sheets, if necessary),			
<u> N/A-</u>		**		
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	- 			
	nendment provides for an exch ions for implementing the amer			
	not applicable, indicate N/A)	idilent it not contaniet	in the amendment usen.	<u>:</u>
NIA	-		_	
,				
			 -	, <u></u>

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, t document's effective date on the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholde action was not required.	er action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amend by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following s 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)	
Dated	
(By a director, president or other officer – if directors or officers have not	
selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	1 COURT
KIRK P. GRHTUTTUHM (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRESIDENT	,
(Title of person signing)	<u></u>