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D. BRUCE
NOV 18 2010
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
	Holding Company, LLC Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning	g this matter to the following:			
Shelley Stewart	<u> </u>			
Name of Person				
Southern Title Holding Co	ompany, LLC			
Firm/Company				
2335 Beville Road	NOV 1			
Address	10 NOV 17 PH 4: 35 ALLAHASSEE. FLORIDA			
Daytona Beach, FL 32119	9F S			
City/State and Zip Code	35 RIDA			
E-mail address: (to be used for future annual report				
For further information concerning this mat				
To further information concerning this mat	iter, prease carr.			
Shelley Stewart	at (386)			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section Division of Corporations	Registration Section Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle	Tallahassee, Florida 32314			
Tallahassee, Florida 32301	rananassee, i fortaa 52514			
Enclosed is a check for the followi	ng amount:			
\$25 Filing Fee	\$55 Filing Fee & Certified Copy			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	Southern Title	Holding	Company,	LLC
2. (a) Principal office address of limited liability company:			eville Roa	
(Note: MUST BE STREET ADDI	<u>ZESS</u>)	Dayton	a Beach, F	L 32119
(b) Mailing address of limited liability c	ompany:	2335 Be	eville Roa	d
(Note: MAY BE POST OFFICE E	<u> </u>	Dayton	a Beach, F	L 32119
7/28/00		L00000		
3. Date of filing/registration in Florida	4. Do	cument numb	er	
5. (a) Registered Agent and Registered Of	fice shown on the rec	ords of the Flo	orida Dept. of S	State:
Registered Agent:		Erum S	. Kistemak	er, Esq.
Registered Office Address:		444 Sea	abreeze Bl	vd., Ste.91
**************************************		Dayton	Beach, F	L 32118
(b) Enter name of <u>NEW Registered Ag</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET A		Erum S	. Kistemak . Clyde Mo	rris Blvd.
11001 2 1 100	Γ	aytona Be	each_,FL_	32117
If the limited liability company is not organ confirmed that after the change or changes a and the business office of the registered age liability company, it is hereby confirmed that of the members of the limited liability comport the operating agreement of the limited liability comports of a member of authorized representative of a member of authorized representative of a member of a member of a member of a member of signee	are made, the Florida sont will be identical. On the change(s) was/wany or as otherwise publicate company.	street address or, in the case vere authorize	of the registere of a Florida lind d by an affirma	ed office nited nive vote
I hereby accept the appointment as register comply with the provisions of all statutes re and I am familiar with and accept the obligion Chapter 608, F.S. Or, if this document is be address, I hereby confirm that the limited life. Signature of Registered Agent	ations of my position c eing filed to merely res	is registerea d flect a change	agent as provid Sin the register	ea jor in ed office