## 0200013275

(Requestor's Name)
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**EXAMINER** 



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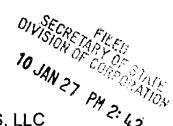
10 JAN 27 PM 2: 42

## COVER LETTER

Registration Section

DIVISIO	on or corp	,o, ations		·
SUBJECT: _	cos		& ESCROW SERVICE ed Liability Company	ES, LLC
		Amendment and fee(s) are sub		
			AYREN L. SUAREZ	
			Name of Person	
			SUAREZ LAW, PA	
			Firm/Company	
215 W			5 WEST 49 STREET	
			Address	
		ŀ	HALEAH, FL 33012	
			City/State and Zip Code	
		Gb	erti@hslawgroup.com o be used for future annual report notif	ication)
Ear further info	mation o	oncerning this matter, please c	•	(Carlon)
roi futulei iine	amation c	oncerning this matter, picase c	an,	
<del></del>		EN L. SUAREZ	at (_305_)	557-4304
	Name o	f Person	Area Code & Daytim	e Telephone Number
Enclosed is a c	heck for th	ne following amount:		
\$25.00 Filin		\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registr Division P.O. Be	ation Section on of Corporations ox 6327 ussee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



COSMOPOLITAN TITLE & ESCROW SERVICES, LLC
(Name of the Limited Liability Company as it now appears on our records.)

(	A Florida Limited Liability Company)			
The Articles of Organization for this Limited I	Liability Company were filed on	05/30/2002	and assigned	
Florida document number L0200001	· · · · —			
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name	of the limited liability company her	<u>re:</u>		
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Compa	any," the designation "l	LC" or the abbreviation	
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
	<del></del>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE			<u> </u>	
B. If amending the registered agent and registered agent and/or the new registered of		our records, <u>enter (</u>	he name of the new	
Name of New Registered Agent:	DAYREN L. SUAREZ		***************************************	
New Registered Office Address:	215 WEST 49 STREET			
	Enter Florida street address			
	HIALEAH	, Florida	33012	
	City	,, 1.01.144	Zip Code	
New Registered Agent's Signature, if changing	Registered Agent:			
I hereby accept the appointment as register the provisions of all statutes relative to the accept the obligations of my position as reg being filed to merely reflect a change in the company has been notified in writing of this	proper and complete performance sistered agent as provided for in C registered office address, I hereb	of my duties, and I d hapter 608, F.S. Or, y confirm that the lin	um familiar with and if this document is nited liability	

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	SUAREZ LAW PL	215 WEST 49 STREET HIALEAH, FL 33012	✓ Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
<u> </u>			Add Remove
D. If ame	nding any other information, enter o	change(s) here: (Attach additional sheets, if necess	ary.) .
-			
Dated	JANUARY 11	/2010)	
	IRMA V. HERNANDEZ, FOR	ember of authorized representative of a member COSMOPOLITAN TITLE & ESCROW SE Typed or printed name of signee	RVICES

Page 2 of 2

Filing Fee: \$25.00