L0300005694

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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Osprey Title, LLC (Name of	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 concernin	g this matter to the following:
Robert G. Lowe III	
(Name of Person)	
Robert G. Lowe, P.L. (Firm/Company)	O7 MA
PO Box 16626	O7 MAY 10 AM 10: 35
(Address)	
Clearwater, Florida 33766-6626	O: 35
(City/State and Zip Code)	
For further information concerning this ma	tter, please call:
Robert G. Lowe III	at (727) 647-3700
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the follow	ing 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.

agent, or both, in the	e State of Fioriaa.		
1. The name of the	limited liability company is:	Osprey Title, LLC	
2. The mailing addi	ress of the limited liability com	npany is : PO Box 16626	
Clearwater, Florida 3	·		
February 14, 2003		L03000005694	
3. Date of filing/reg	ristration in Florida	4. Document number	,
	registered agent and the registe nt of State:	ered office address as shown on th	ne records of the
	Robert G. Lowe III	Nome	
	28059 US Highway 19	Name N. Suito 358	
		ddress	OT DIVIG
Clearwater, Florida 33761			o7
		tate and Zip	五 3 元
6. The name and add	dress of the new registered age	ent and/or office:	10 SEE
	Robert G. Lowe, P.L.		FILED STAIL SECRETARY OF STAIL ON SECRETARY OF CORPORATIONS 35
		ame	京 鑿
2744 Summerdale Drive			မွှော် မွှော်
	Florida street address ((P.O. Box NOT acceptable)	
	Clearwater	FL 33761	
	City, Sta	ite and Zip	
confirmed that after and the business off liability company, it of the members of t or the operating age	the change or changes are madice of the registered agent will is hereby confirmed that the confirmed that th	nder the laws of the State of Floride, the Florida street address of the be identical. Or, in the case of a change(s) was/were authorized by r as otherwise provided in the articompany.	ne registered office Florida limited an affirmative vote
Robert G. Lowe III			
(Printed or typed name of	signee)		
I hereby accept the comply with the pro and I am familiar w Chapter 608 F.S. (address, I hereby acceptance) (Signature of Registered Acceptance)	1	ent and agree to act in this capaci to the proper and complete perfor of my position as registered agen ed to merely reflect a change in t company has been notified in wri	ity. I further agree to mance of my duties, it as provided for in he registered office iting of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (8/05)