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SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

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## **COVER LETTER**

	egistration Secivision of Corp				••	
CHDIECT		ers Title Services LLC				
SUBJECT	·	Name of Lin	nited Liability Company			
The enclos	ed Articles of A	Amendment and fee(s) are sub	omitted for filing.			
Please retu	rn all correspor	ndence concerning this matter	to the following:			
		Rick Mueller				
			Name of Person		_	
		HomePartners Title Service	ces LLC			
			Firm/Company		_	
		1535 Three Village Road				
			Address		<del></del>	
		Weston, FL 33326		•	<del>=</del>	
		rmueller@homepartnerstitle	City/State and Zip Code e.com	:	SECTE SECTE	711
		E-mail address: (	to be used for future annual report notific	ation)	MAR 2	Printer Printer
For further	information co	oncerning this matter, please c	all:	, , , , , , , , , , , , , , , , , , ,	0 Y	FILE
Rick Muel	ler		954 434-7724 E	xt. 1422	_α Θ≀ ι	D
	Name of	Person	Area Code Daytime	Telephone Numbe	25 m 25	
Enclosed is	a check for the	e following amount:				
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of Status d	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	ePartners Title Services LLC		
(Name of the Limited L (A F	iability Company as it now appea Iorida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liabil	ity Company were filed on	February 7, 2017	and assigned
Florida document numberL03000010841	<del></del> -		
this amendment is submitted to amend the following	g:		
. If amending name, enter the new name of the	limited liability company h	ere:	
		; . <u></u>	Ą
he new name must be distinguishable and contain the words	"Limited Liability Company," the o	lesignation "LLC" or the	tobre ition "L.L.C."
nter new principal offices address, if applicable	:	)	
Principal office address MUST BE A STREET A	DDRESS)	A S S S S	A 20
		نين .	
			S W
nter new mailing address, if applicable:		Ē	7 <b>2</b>
Mailing address MAY BE A POST OFFICE BOX	<u> </u>		· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, ente	r the name of the
Name of New Registered Agent:			
New Registered Office Address:	Enter Flo	rida street address	
	Liner Pio		
_	City	, Florida _	Zip Code
	J.,,		

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Marlen Rodriguez	1535 Three Village Road	
		Weston, FL 33326	Remove
		<u> </u>	E Change
AMBR	Homepartners Title Inc.	2121 SW 3rd Ave	<b>∃</b> Add
		Suite 601	□ Remove
		Miami, FL 33129	□ Change
			Add
			Remove
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Effectiv	ve date if other	r than the date o	f filing:				(opti	•	ហ	
(If an effe Note: I	ctive date is listed, If the date inserte	the date must be speed in this block does to on the Department	cific and car	the applical			0 days after	filing.) Pı		
		a delayed effec r the record is		e, but not	an effecti	ve time, a	: 12:01 a	ı.m. on	the ea	arlier of:
Dated _	March 10		,	2017	_ •					
		$\mathcal{M}$	Le	R	7/	~				_
		Signatu	re of a men	iber or authori	ized represen	tative of a men	ıBer			
		•		Marlen Ro	ndrignez					

Page 3 of 3

Filing Fee: \$25.00