

103000054467

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

DEC 11 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HAILE TITLE COMPANY, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RYAN C. CURTIS

Name of Person

CURTIS LAW FIRM, LLC

Firm/Company

175 NW 138TH TER., STE. 100

Address

JONESVILLE, FL 32669

City/State and Zip Code

RCURTIS@CURTISLAWFIRM.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RYAN C. CURTIS

Name of Person

at (**352**)

333-7207

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

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TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

HAILE TITLE COMPANY, 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 Liability Company were filed on 12/19/2003 and assigned Florida document number 103000054467.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

4923 NW 43RD STREET

SUITE B

GAINESVILLE, FL 32606

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4923 NW 43RD STREET

SUITE B

GAINESVILLE, FL 32606

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TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

RYAN C. CURTIS

New Registered Office Address:

175 NW 138TH TER., STE. 100

Enter Florida street address

JONESVILLE

City

, Florida

32669

Zip Code

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 608, 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 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>	<u>Address</u>	<u>Type of Action</u>
MGRM	RYAN C. CURTIS	12104 NW 1ST LANE GAINESVILLE, FL 32607	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	DANIEL R. MONTEAU	9278 NW 26TH AVE GAINESVILLE, FL 32606	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	SUNPLEX GAINESVILLE TITLE, LLC	605 CRESCENT EXEC CT SUITE 336 LAKE MARY, FL 32746	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	ROBERT P. BUTTS	5200 SW 91ST TERRACE SUITE 101 GAINESVILLE, FL 32608	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	CRAIG A. ROBERTSON	5203 SW 91ST TERRACE SUITE E GAINESVILLE, FL 32608	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	MICHAEL D. SECHREST	5200 SW 91ST TERRACE SUITE 101 GAINESVILLE, FL 32606	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

MGRM MARC D. WARNER 5200 SW 91ST TER., SUITE 101 [REMOVE]
GAINESVILLE, FL 32608

MGRM GARY THOMAS 5200 SW 91ST TER., SUITE 101 [REMOVE]
GAINESVILLE, FL 32608

Dated NOVEMBER 19, 2009

Signature of a member or authorized representative of a member

Michael D. Sechrest
Typed or printed name of signee

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