104000022071

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name) OG Occument Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: 2/27 A Name Ch
Office Use Only



200066646172

//27/06--01021--013 **25.00



M. Hodges

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Sabal Palm Title, 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:
Evelyn Lara (Name of Person)
THE Closing Partners, LCC (Firm/Company)
2823 Coconut AVENUE
Coconut Grove F1 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (305) 332-2202 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$25.00 Filing Fee \$\ \text{S55.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\ \text{Certified Copy (additional copy is enclosed)}\$\$ 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Present Name)
(A Florida Limited Liability Company)

Sabal Palm

FIRST:	The Articles of Organization were filed on 3/22/04 and assigned document number L040000 2207/	
SECOND:	This amendment is submitted to amend the following:	
	Change existing Name to:	# 18 5
	Title closing Paretners, LLC. the address	
	Will change to : 2823 Coconot AVENUE	. :
	Coconut Grove, F133133.	
	Alread Sent Change on Agent to be	A man constraints
	the following: Eyelyn LARA	* *
	2823 Coconot Avenue	• • •
	Mani , 7/ 33/33	
		० हैं १
	Control of the contro	11
Dated	Feb 22 , 2004	
	Eaglen L.	J
	Signature of a member or authorized representative of a member	•
	Evelyn Cana	· 45 - 2 ==
	Typed or printed name of signee	

Filing Fee: \$25.00

I EVELYN LARA ACCEPT THE APPOINTMENT OF REGISTERED AGENT AND ARE EAMILIAR WITH THE OBLIGATIONS OF THE POSITION.

EVELYN LARA

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this 22 of February 2006 by **Evelyn Lara, is** (not) personally known to me, and who has produced a Florida driver's license identification and who has (not) taken an oath.

Print Name: Albaina Lovelace

Commission Expires: 2/17/2008

Albania Lovelace
Commission #DD291828
Expires: Feb 17, 2008
Bonded Thru
Atlantic Bonding Co., Inc.