

65 0000 44653

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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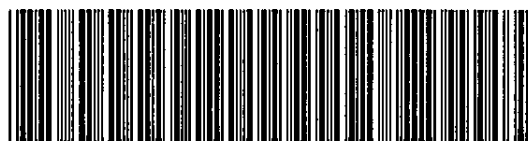
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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65-44653  
OK

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** State Title Insurance Company, L.L.C.  
(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:

Agustin R. Benitez

(Name of Person)

125 Roann Drive

(Firm/Company)

(Address)

Oviedo, Florida 32765

(City/State and Zip Code)

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For further information concerning this matter, please call:

Agustin R. Benitez

(Name of Person)

at ( 407 ) 399-7120

(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

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

State Title Insurance Company, L.L.C.

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on 05/05/2005 and assigned  
document number L05000044653

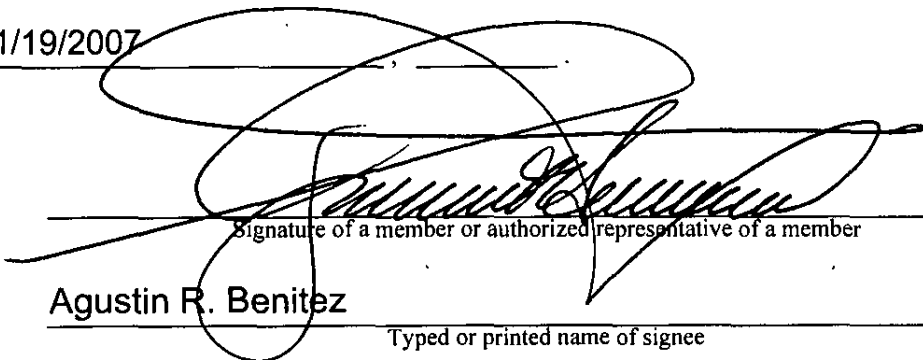
**SECOND:** This amendment is submitted to amend the following:

The name of the company shall hereinafter be known as: State Title Insurance Agency, L.L.C.

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TALLAHASSEE, FLORIDA

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Dated 1/19/2007

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Agustin R. Benitez

\_\_\_\_\_  
Typed or printed name of signee

Filing Fee: \$25.00