

LD5000091726

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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

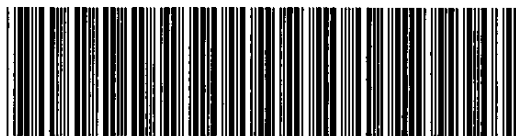
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FIRST CLASSIC TITLE INSURANCE GROUP, 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:

JENNIFER JOSEPH

(Name of Person)

FIRST CLASSIC TITLE INSURANCE GROUP, LLC.

(Firm/Company)

1021 IVES DAIRY ROAD, SUITE #115

(Address)

MIAMI, FL, 33179

(City/State and Zip Code)

For further information concerning this matter, please call:

JENNIFER JOSEPH

(Name of Person)

at (

305 654-1584

(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

FILED

06 JUL 12 PM 2:13

FIRST CLASSIC TITLE INSURANCE GROUP, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 9/9/2005 and assigned
document number LOS000091726.

SECOND: This amendment is submitted to amend the following:

① DELETE CYRUS S. WEST AS MGR.

② ADD MARION L. WEST AS MGR

1021 IVES DAIRY ROAD. SUITE #115

MIAMI, FL. 33179

Dated

8/7/2006

Signature of a member or authorized representative of a member

CYRUS S. WEST, MGR

Typed or printed name of signee

Filing Fee: \$25.00