

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H080000796973)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: BUSINESS FILINGS

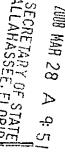
Account Number : 105256001620

Phone

: (608)827-5300

fax Number

: (608)827-5501







REGISTERED AGENT CHANGE

LHT TITLE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

EXAMINE IN

Electronic Filing Menu

Corporate Filing Menu

Help

HU80000746412

COVER LETTER

TO: Registration Section Division of Corporations		·			
SUBJECT: LHT Title, LLC (Name of Lin	nited Liabil	ity Company)			
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Off	fice Change	and fee(s) are submitted for filing.			
Please return all correspondence concerning th	is matter to	the following:			
Registered Agent Department		2000 MAR 28 SECRETARY TALLAHASSE	-		
(Name of Person)		HAS	Concustors Concustors		
Business Filings Incorporated		ŗ, o			
(Firm/Company)		A C			
8040 Excelsior Drive, Suite 200		9: 5 I			
(Address)	······	_			
Madison, WI. 53717					
(City/State and Zip Code)		_			
For further information concerning this matter	, please call	:			
Registered Agent Department	(800)	981 - 7183			
(Name of Person)		(Area Code & Daytime Telephone N	umber)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following	amount:				
\$25 Filing Fee	□ \$5	5 Filing Fee & Certified Copy			
INHS18 (8/05) <i>HU8000</i>	5796	973			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provision liability company submits agent, or both, in the State	the following stat	416 or 608.50 ement in order	8, Florida Stat to change its 1	utes, the registered	undersi office o	gned limited or registered
1. The name of the limited	•	is: <u>LHT Title,</u>	LLC			•
2. The mailing address of				awk Blvd)	
Davie, FL. 33328-2109	tilo minico monic	y company is .		·		· · · · · · · · · · · · · · · · · · ·
DAVIS, F.E. 33320-2109		··				,
5/1/2006	L06000045318					
3. Date of filing/registrati	on in Florida	,	4. Document	number		
5. The name of the registe Florida Department of S	red agent and the r State:	egistered office	address as sho	wn on the	records	of the
•	The Florida Com					
		Name				
•	1203 Governors	Square Blvd, Sui	te 101	¥~	~~;	
		Address		FE	2000	
	Tallahassee Fl, 3			<u>-</u> ≥3		
	C	ity, State and Z	ıp	25	MAR	- 0
6. The name and address o	of the new registere	d agent and/or	office:	ARY O	28	
	Business Filings	Incorporated		لەس ^{ئەلەس}	Þ	
•		Name		\$1, 1,8	<u>ب</u>	
_	1203 Governors	Square Blvd, Sui	te 101_		ਜ਼ ਪਾ	
	Florida street add	lress (P.O. Box	NOT acceptable	lc)>'''		
	Tallahassee		32301-2960	\	_	
	Cit	y, State and Zip)			·
If the limited liability come confirmed that after the chand the business office of liability company, it is her of the members of the limited the operating agreement (Signature of a member or author)	ange or changes as the registered agen eby confirmed that ited liability comp for the limited liab turbed persentative of a m	re made, the Flo it will be identic the change(s) any or as other bility company.	orida street addr :al. Or, in the c was/were autho	ess of the ase of a F rized by a	register lorida li n affirm	ed office mited ative vote
(Printed or typed name of signee)	LT					
I hereby accept the appoing the provision and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm (Signature of Registered Agent)						
	Marc	رعشانهمو ,	ANP BUSSI	'ce 55 Fro	" VY "	-ncorporated
Division	n of Corporations	, P.O. Box 632 LING FEE: \$25	7, Taliahassee,	FL 3231	.4	`

INHS18 (8/05)

H080000796973