

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000076790

FILED
Apr 26, 2009
Secretary of State

Entity Name: RGM TITLE SERVICES, LLC

Current Principal Place of Business:

C/O RONNY J. HALPERIN, P.A.
17961 BISCAYNE BOULEVARD, SUITE, B-1
AVENTURA, FL 33160

New Principal Place of Business:

Current Mailing Address:

C/O RONNY J. HALPERIN, P.A.
17961 BISCAYNE BOULEVARD, SUITE, B-1
AVENTURA, FL 33160

New Mailing Address:

FEI Number: 26-0737187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RONNY J. HALPERIN, P.A.
17961 BISCAYNE BOULEVARD
SUITE B-1
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HALPERIN, RONNY J
Address: 17961 BISCAYNE BOULEVARD, SUITE B-1
City-St-Zip: AVENTURA, FL 33160

Title: MGR () Delete
Name: DIAZ-CLARK, MAYLING
Address: 17961 BISCAYNE BOULEVARD, SUITE B-1
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RONNY HALPERIN

MGRM

04/26/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date