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SECRETARY OF STATE
TALLAHASSEE, FL

2022 SEP -6 PH 2: 4

COVER LETTER

TO:	Registration Se Division of Cor			
CHIDIE	CT.	METRO 1	TITLE GROUP, LLC	
SUBJE	CCT:		nited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	indence concerning this matter	to the following:	
			PLAMENA VELIKOVA	
		-	Name of Person	
		М	ETRO TITLE GROUP, LLC	
			Firm/Company	
		2295	S. HIAWASSEE ROAD # 413	
			Address	
			ORLANDO, FL 32835	
			City/State and Zip Code	
			@METROTITLEGROUP.NET	
		E-mail address: (to be used for future annual report no	tification)
For furt	her information co	oncerning this matter, please c	all:	
	PLAMENA V	VELIKOVA	321 251-7499 at ()	
	Name of	Person	Area Code Daytir	ne Telephone Number
Enclose	d is a check for th	e following amount:		
■ \$25	i.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 S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Tallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		E GROUP, LLC		
(Name of the Lim	ited Liability Compa (A Florida Limited	any as it now appears o Liability Company)	n our records.)	
The Articles of Organization for this Limited I		were filed on	10/01/2007	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company here	:	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the desig	gnation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:		2295 S. HIAWASS	SEE ROAD # 413	
Principal office address MUST BE A STREE	ET ADDRESS)	ORLANDO, FL 32	2835	
				
Enter new mailing address, if applicable:		2295 S. HIAWASS	SEE ROAD # 413	
Mailing address MAY BE A POST OFFICE	BOX)	ORLANDO, FL 32835		
				TX ST
B. If amending the registered agent and/or		address on our reco	ords, <u>enter the nan</u>	ie of themen regis
agent and/or the new registered office addre	ess here:			Y OF ST YSSEE,
Name of New Registered Agent:				
New Registered Office Address:	2295 S. HIAW.	ASSEE ROAD # 413		
		Enter Florida	street address	
	ORLANDO		, Florida	32835
		City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□Remove
		-	□Change
			□Add
			Remove
			□Change
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Tiffication dua	An in the second second	c e	9/1/2022		
(If an effective danse) Note: If the danse	te, if other than the date of ate is listed, the date must be spec- date inserted in this block does ffective date on the Departmen	ific and cannot be prior t s not meet the applica	o date of filing or more t ble statutory filing red	(optional) han 90 days after filing.) Pursuant to 605.0 quirements, this date will not be listed	0207 (3) d as the
the record specit ford is filed.	fies a delayed effective date, b	out not an effective tin	ne, at 12:01 a.m. on th	ne earlier of: (b) The 90th day after	the
Dated	SEPTEMBER I	2022	-· /		
		Phillipp	slulious		
	Signatur	of a member or author	ized representative of a	member	
	/	/			
		PLAMENA 1	VELIKOVA		

Filing Fee: \$25.00