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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FI ORIGINA

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COVER LETTER

| TO: Registration Section Division of Corporations |
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| SUBJECT: ACCURATI TITLE & ESCROW LLC (Name of Limited Liability Company) |
| Dear Sir or Madam: |
| The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Scott Kothan (Name of Person) |
| ACCUMATE TITLE a ESCROW LLC ART OF ALL OF AL |
| 2840 NE14 M 5 F 408 (Address) (Address) (Address) (Address) |
| Pumpon o Beach /133062 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Scott Komen at (954) 647-8139 (Name of Person) (Area Code & Daytime Telephone Number) |
| 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 \$\sum \text{\$\sum \\$55 Filing Fee & Certified Copy}\$ |



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

| | mited liability company | | | | |
|--------------------------------|------------------------------------------|---------------------|---------------------|----------------|-----------|
| 2. This limited liabili | ity company was organiz | zed under the law | | SECR |) 07 DE |
| 3. The Florida docum | nent/registration number | of this limited li | ability company is: | ETARY OF S | C 24 AMII |
| 4. I, JAm es (Print Nat | ne of Person Resigning) | <u>~</u> , hereby r | | | : D7 — |
| resignation in writi | lity company and affirm ng. | the limited liabil | ity company has bee | en notified of | my |
| Signature of Resign | ning Member, Managing | g Member er Mar | aager | | |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | | |) / / | |
| | reed | Done | ASAP | | |
| CR2E079 (5/06) | | · · | | | |
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