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PILED 2014 OCT 27 P 3:5 SECRETARY OF STATE

B. BOSTICK

OCT 2 9 2014

FXAMINER

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Florida Title & Escraw Group UC  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:
Kenneth M. Ristau Name of Person
Florida Title & Escrow Group, UC
3015 Sw Pine Island Rd #111
Egge Coral FL 33991 City/State and Zip Code
Matta Flatitle and Summer Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person  at SSS SSS SSS SSS SSS SSS SSS SSS SSS S
Enclosed is a check for the following amount:  \$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee \$\Bigcup \$10.00 Filing Fee \$\Bigc
Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) 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

Name of the Limited Liability Compa	any as it now appears on our records.)			
(A Florida Limited	any as it now appears on var records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number	were filed on 12 10 1 9	27	and ass	signed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and end with the words "Limited Lial	bility Company," the designation "LLC" o	~~4		L.L.C."
Enter new principal offices address, if applicable:		(A)	2916	
(Principal office address MUST BE A STREET ADDRESS)		D IN	9	
		TAR ASS	2	-
		33 70		П
Enter new mailing address, if applicable:		- N	ט	
(Mailing address MAY BE A POST OFFICE BOX)		HAGE HERE	\ <del>\tilde{\tilde</del>	
		) <del>&gt;</del>	0	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		nter the	name	of the nev
registered agent and/or the new registered office address ner	<u>¢</u> ;			
Name of New Registered Agent:				
····				
New Registered Office Address:	Enter Florida street address	<del></del>		
	ren a unita	la.		
	, Florid		ip 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Sally A. A. Slaw	Address	Type of Action
1014	Sally A. Mishau	3015 Sw Pricts long Pricts lon	_ □ Add _ □ Remove
		SEERETAN AHAS:	Remove
		FEE. FLORIDA	Add Remove

,	
•-	Sally H. Ristau is beaby added
	to Florida Title & Escrav Broup UC
	95 Vica President.
	ective date, if other than the date of filing:  effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after date this document is filed by the Florida Department of State)  (optional)
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the	effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after date this document is filed by the Florida Department of State)  and Chober 24
the	effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after date this document is filed by the Florida Department of State)

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Filing Fee: \$25.00

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TAIL AHASSEE, FLORIDA