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EXAMINER

COVER LETTER

то:	Registration Sect Division of Corpo							
SUBJE	CT:	OIG TITLE	& ESCROW, LLC					
The enc	losed Articles of A	mendment and fee(s) are su	bmitted for filing.					
Please r	eturn all correspond	dence concerning this matte	r to the following:					
RENE OTERO								
Name of Person OIG TITLE & ESCROW, LLC								
Firm/Company								
		7520	W. WATERS AVE S	TE 3				
Address								
		TAMPA, FL 33615						
			City/State and Zip Code			Z	<u> </u>	
		RENE.	OTERO@OIGTITLE	E.COM				4.1
For furth	ner information con	e-man address: (to be used for future annual repeall:	port notification	1)	TEST S	5	HARMAN
	REN	IE OTERO	at (813)	889-00	19 X100	11 G		Wil none
	Name of P	Person	Area Code &	¿ Daytime Tele		A TANK	100	Í
Enclosed	is a check for the	following amount:						
₹2 5.0	\$25.00 Filing Fee \$\ \text{Certificate of Status} \text{S55.00 Filing Fee & S60.00 Filing Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Co (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} Certi							

1 1

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

OIG TITLE	E & ESCROW, LLO	C		_			
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appear imited Liability Company)	rs on our records.)					
The Articles of Organization for this Limited Liability Co	ompany were filed on	02/12/2008	and :	assigned	i		
Florida document numberL08000015357	··						
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the limit	ted liability company her	<u>e</u> :					
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Compa	ıny," the designation "L	LC" or th	ie abbrev	 /iation		
Enter new principal offices address, if applicable:			Pres	177	· 		
(Principal office address MUST BE A STREET ADDR.	ESS)			E.,			
			Endi:	A)	ement po		
			(5) 20	5	4		
Enter new mailing address, if applicable:			(1) (2) (2) (3)	739 736	in the		
(Mailing address MAY BE A POST OFFICE BOX)			- CO	THE	il , , , ,		
100 min 200 (1222 2021)			es m	N	-		

B. If amending the registered agent and/or register		our records, <u>enter t</u>	<u>he name</u>	of the	new		
registered agent and/or the new registered office addr	ess nere:						
Name of New Registered Agent:							
New Registered Office Address:							
	Enter Florida street address						
	, Florida						
	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 608, 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 Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Type of Action Address Title Name RENE R OTERO** MGRM 7520 W. WATERS AVE STE 3 ✓ Add TAMPA, FL 33615 Remove ☐ Add ☐ Remove Add 🔲 Remove Add Remove □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **NOVEMBER 12** 2010 Dated_ Signature of a member or authorized representative of a member **RENE OTERO**

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee