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SECRETARY OF STATE ONVISION OF CORPORATIONS

J. BRYAN

JUL 2 9 2008

EXAMINER

COVER LETTER

TO: Registration So Division of Con				
SUBJECT: Co	than Title (Name of Lin	ited Liability Company)		
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Berkley Ca	(Name of Person) Pital Corp. (Firm/Company) Hoore Rd (Address)	——————————————————————————————————————	SECRETARY DE ORATIONS ON JUL 28 PH 2: 18
	WCA CAT	(City/State and Zip Code)	0 ,	
	concerning this matter, please of Rerson)	at (SCI) 282 - 1 (Area Code & Daytime To	elephone Number)	
•				
Enclosed is a check for t	he following amount:			
□ \$25.00 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 State Certified Copy (additional copy is	

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

Gotham Title,	LLC	1 28 CT
(Name of the Limited Liabili (A Florida	ty Company as it now appears of a Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability	Company were filed on	22-08 and assigned
Florida document number <u>LO80000 SOS</u>	<u>19</u> 2	හ :
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and end with the w 'L.L.C."	ords "Limited Liability Company,"	'the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regi registered agent and/or the new registered office ad		records, enter the name of the new
*		
* 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 **Title** Name **Address Type of Action** Berkley Marketing Corp Berkley Capital Cryp Add Remove ☐ Add Remove 🗂 Add Remove ☐ Add **□** Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member of authorized representative of a member hox JR. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00