409000070610

	(Requestor's Name)					
	(Address)					
	(Address)					
	(City/State/Zip/Phone #)					
	(Only/State/21p/1 Holle #)					
PICK-UP	WAIT MAIL					
	(Business Entity Name)					
	(Document Number)					
Certified Copies	Certificates of Status					
	-					
Special Instructions to Filing Officer:						

Office Use Only



800395489228

LLC RAZRO, Change

2022 OCT -- 5 AM II: 20

1-1L : LV 2022 OCT -6 AM 10: 25

A. RAMSEY OCT - 7 2022

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

	ACCOUNT NO.	:	120000000	195		
	REFERENCE	:	973433	7941640		
	AUTHORIZATION	:	Linell of	e peda		
	COST LIMIT	:	\$ 25.00	7,00		
ORDER DATE : S	September 26, 20	22				
ORDER TIME :	9:03 AM					
ORDER NO. : 9	973433-099					
CUSTOMER NO:	7941640					
	· •					
CHANGE OF AGENT						
NAME: EQUITABLE NATIONAL TITLE						
	GROUP, LLC					
PLEASE RETURN	THE FOLLOWING AS	PR	OOF OF FIL	ING:		
CERTIF						
XX PLAIN S	STAMPED COPY					
CONTACT PERSON:	Eyliena Baker		EXT#			

EXAMINER:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

۱.	Na	ame of the limited liability company: EQUITABLE NAT	ΓΙΟΝ	AL	TITLE GR	OUP, LLC
	(a)	6900 TURKEY LAKE ROAD		(b)	AGOO TH	RKEY LAKE ROAD
2.	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		SUITE 1-10			SUITE 1	-10
		ORLANDO, FL 32819	_		ORLAND	00, FL 32819
		07/22/2009		l	_0900007	0610
3.		Date of filing/registration in Florida	4.	_		Document number
5.	(a)	MCGRAW, JON, ESQ				-3
٥.	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 6900 TURKEY LAKE ROAD				
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				OCT -6 H
		SUITE 1-10	_			
		ORLANDO, FL 3	32819	9		- - -
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Corporation</u> Service Company	Office	яdd	ress:	_
		NEW Registered Office Address:				-
		1201 Hays Street				_
		Tallahassee, FL_3	32301	1		_
cha age wa the	ange ent w s/we arti 'S/ Ry Signat	or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the linear G. Foley ure of a member or authorized representative of a member	egiste ility the li mited R	ered con imit d lia yan LC,	l office an npany, it is led liability libility con G. Foley Sole Man	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in nany. Secretary on behalf of Tempo Title, nager Printed or typed name of signce
pro the to t	ovisie obli mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete perigations of my position as registered agent as provided fifty reflect a change in the registered office address, I here in writing of this change	erfori for in reby	mar Ch con	ice of my d apter 605 Jirin that	activ. I furiner agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been y, Asst. Vice President
Sig	gnatui	re of Registered Agent			_	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00