

LD9000161700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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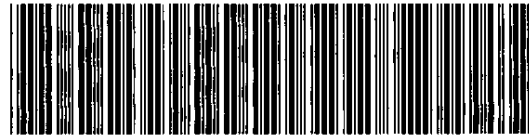
(Business Entity Name)

(Document Number)

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10 AUG 20 PM 10  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

AUG 23 2010

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ROYAL TITLE SERVICES L.L.C.  
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:

JAMES TOMASSO

Name of Person

ROYAL TITLE SERVICES L.L.C.

Firm/Company

5891 S. MILITARY TRAIL#406

Address

LAKE WORTH, FL 33463

City/State and Zip Code

ROYALTITLESERVICES@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAMES TOMASSO

Name of Person

at ( 561 )

394-1110

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

☐ \$55 Filing Fee & Certified Copy

FILED  
10 AUG 20 PM 10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

*Pursuant to the provisions of sections 608.416 or 608.508, 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.*

1. Name of the limited liability company: ROYAL TITLE SERVICES L.L.C.

2. (a) Principal office address of limited liability company: 5891 MILITARY TRAIL #406



(Note: **MUST BE STREET ADDRESS**)

LAKE WORTH FL  
33463



(b) Mailing address of limited liability company:

5891 MILITARY TRAIL

(Note: **MAY BE POST OFFICE BOX**)

LAKE WORTH, FL  
33463

10/21/2009

L09000101700

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

CHIRAMONTE, ANTHONY

Registered Office Address:

5891 S. MILITARY TRAIL 406  
LAKE WORTH, FL  
33463

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**

**NEW Registered Agent:**

JAMES TOMASSO

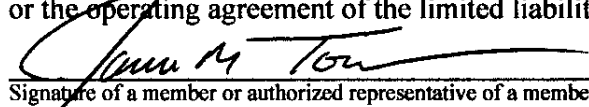
**NEW Registered Office Address:**

21346 ST. ANDREWS BLVD. #212

(**MUST BE FLORIDA STREET ADDRESS**)

BOCA RATON FL 33433

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.



Signature of a member or authorized representative of a member

JAMES TOMASSO

Printed or typed name of signee

*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.*



Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00