#<u>L/0000035903</u>

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SECRETARY OF STATE
TAILANDSEFF FLORIDA

K.SALY EXAMINER MAY 1 0 2013

COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: Uptown Title LLC

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:

Adrienne C. Prince

Name of Person

Uptown Title LLC

Firm/Company

710 94th Avenue North, Suite #305

Address

St. Petersburg, FL 33702

City/State and Zip Code

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

For further information concerning this matter, please call:

Adrienne C. Prince

727₂₅₈₋₄₇₄₅

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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 Status &
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

FILED 13 MAY -B PM PM

	CECCO PH 2: 14
UPTOWN TITLE LLC	SECRETARY
(Name of the Limited Liability Company as it not (A Florida Limited Liability Co	SECRETARY OF STATE mpany) SECRETARY OF STATE MANAGEMENT OF STATE
The Articles of Organization for this Limited Liability Company were filed Florida document number L10000035903	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability comp	pany here:
The new name must be distinguishable and end with the words "Limited Liabilit"L.L.C."	ty Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
<u> </u>	
B. If amending the registered agent and/or registered office addr registered agent and/or the new registered office address here:	ess on our records, enter the name of the nev
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address

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.

City

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Leslie Whitney Prossner	710 94th Avenue North	Add
		Suite #305	Remove
		St. Petersburg, FL 3370	2
			Add
			Remove
			<u></u>
·-•			Add
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re of a member or authorized representative of a member
e

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Filing Fee: \$25.00