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## **COVER LETTER**

	n Section Corporations	
Titleco	orp of America, LLC	
SUBJECT:	Name of Limited Liability Comp	pany
The enclosed Article	es of Amendment and fee(s) are submitted for filing.	
Please return all corr	respondence concerning this matter to the following:	
	John Yeomans	
	Name of Pe	rson
	Titlecorp of America, LLC	
	Firm/Comp	any
	5728 Major Blvd, Suite 604	
	Address	
	Orlando, Florida 32819	
	City/State and Z	ip Code
	E-mail address: (to be used for futur	e annual report notification)
For further informat	ion concerning this matter, please call:	
John Yeomans	407	985-3798 x 105
Ne	ime of Person Area C	ode Daytime Telephone Number
Enclosed is a check	for the following amount:	
<b>■ \$25.00</b> Filing Fo	Certificate of Status Certified (	

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

(Name of the Limi	ted Liability Compa (A Florida Limited I	ny as it now appears on our liability Company)	records.)	<del></del>	
The Articles of Organization for this Limited L. Florida document number L10000037224	iability Company	were filed on April 6, 20	110	and assigned	
This amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name o	f the limited liab	ility company here:			
The new name must be distinguishable and contain the v	vords "Limited Liabil	lity Company," the designation	in "LLC" or the abbr	reviation "L.L.C."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		311 Maitland Avenue			
		Suite B			
		Altamonte Springs, Florida 32701			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		311 Maitland Avenue Suite B	, , , , , , , , , , , , , , , , , , ,	2019 DCT	
		Altamonte Springs, Fl	orida 32701	SE I	
B. If amending the registered agent and registered agent and/or the new registered o	ffice address her	<u>e</u> :	records, <u>enter t</u> i	PAGE 142	
Name of New Registered Agent:	John Yeoman	S			
New Registered Office Address:	311 Maitland	Avenue, Suite B			
		Enter Florida stree	t address		
	Altamonte Spi	rings	, Florida <u>327</u>	01	
		City		Zip Code	

## New Registered Agent's Signature, if changing Registered Agent:

Titlecorp of America, LLC

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 605, 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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member Type of Action Address Title Name \_D Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change \_□ Add \_□ Remove \_□ Change ☐ Remove ☐ Change \_□ Add \_□ Remove \_□ Change □ Add □ Remove ☐ Change

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effective date is listed, e: If the date inserte	the date must be specific	and cannot be prior to of meet the applicab	date of filing or more t	nan 90 days after filing.) Purs juirements, this date will r	uant to 605,0207 10t be listed as
record specifies he 90th day afte	a delayed effective or the record is file	e date, but not ed.	an effective time	e, at 12:01 a.m. on t	he earlier o
October 21		2019	<u>.</u> ·		
	-/			4RM	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00