## 210000059372

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## **COVER LETTER**

TO:	Registration Sec Division of Corp					
SUBJE	ECT:	Lincoln Ti	tle Services, LLC			
		Name of Lim	ted Liability Company			
		Amendment and fee(s) are sub	_			
Please	return all correspon	idence concerning this matter	to the following:			
Michael Ussery					_	
			Name of Person			
		Line	coln Title Services, LLC		_	
			Firm/Company			
		1540 Inte	ernational Parkway, Suite 2000			
			Z S			
			HAA BLI	٦		
Lake Mary, Florida 32746  City/State and Zip Code					AS:	-
michael@linco			el@lincoIntitleservices.com	ncoIntitleservices.com		רה כל הור ה
		E-mail address; (	to be used for future annual report notif	ication)		[ ]
For fur	ther information co	ncerning this matter, please of	all:		2011 JUN 10 PM 25 56 SECRETARY OF STATE ALLAHASSEE. FLORIDA	
	Mich	nael Ussery	at (_407_)	536-5249		
	Name of		Area Code & Daytim		er er	
Enclose	ed is a check for the	e following amount:				
\$25.00 Filing Fee \$30.00 Filing Fee & Certificate of Status		S55.00 Filing Fee & Certified Copy (additional copy is enclosed	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		ed)	
MAILING ADDRESS: Registration Section		STREET/COURI Registration Section				

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

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lincoln Title	Services, LLC			
(Name of the Limited Liability Com (A Florida Limite	pany as it now appeard Liability Company)	rs on our records.)		
(/// lorda Dilline	a Buomity Company,			
The Articles of Organization for this Limited Liability Compa	any were filed on	June 3, 2010	and assi	gned
Florida document numberL10000059372				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited l	iability company he	re:		
				•
The new name must be distinguishable and end with the words "L	imited Liability Comp	any," the designation	"LLC" or the at	obreviation
"L.L.C."			TA S: 28	•
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)	)			
1 Thomas office and ess mode Barranian and the second			HASS	
	<del></del>			m
5				
Enter new mailing address, if applicable:	<del> </del>		20.2	
(Mailing address MAY BE A POST OFFICE BOX)			5 m 5	
		···-		<del></del>
				•
B. If amending the registered agent and/or registered registered agent and/or the new registered office address !		our records, <u>enter</u>	the name of	the new
TO A COLUMN TO THE TOWN TO A COLUMN THE TOWN TO THE TAX A COLUMN THE TAX A	151.5			
Name of New Registered Agent:				
Name of New Registered Agent.				<del> </del>
New Registered Office Address:			11	<del> </del>
	En	nter Florida street aa	iaress	
<u></u>		, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MRG	S Joseph Modric	PO Box 161514 Altamonte Springs, FL 32714	☐ Add ✓ Remove
			Add Remove
			Add Remove
		-	Add Remove
	<del></del>		A Dadd T
			dd dd emov
D. If amend	ling any other information, enter	change(s) here: (Attach additional sheets, if necessar	y.) 
Dated	June 6	2011	<del></del>
	The	TOM	
	Signature of a r	member or authorized representative of a member	
		Michael Ussery Typed or printed name of signee	

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Filing Fee: \$25.00