## LIO 000112848

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## COVER LETTER

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TO: Registration Section Division of Corporations

TAMPA BAY TITLE, LLC SUBJECT:

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:

Wayne Harrell

Name of Person

BPM SOLUTIONS, LLC

Firm/Company

1605 S ALEXANDER ST, SUITE #102

Address

PLANT CITY, FL 33563

City/State and Zip Code

payables@bpm-sol.com

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

For further information concerning this matter, please call:

Michael LaRosa	813 382-3880 at ( )
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Enclosed is a check for the following amount:

S25 Filing Fee

□ \$55 Filing Fee & Certified Copy

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## 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.

1. N	ame of the limited liability company:	ITLE,	LLC						
2. (a)	350 EAST BLOOMINGDALE AVENUE		(b)	1605 SOUTH ALEXANDER ST					
2. (2)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	BRANDON, FL 33511			SUITE 102					
				PLANT CI	TY, FL 33563				
	10/28/2010		l	.1000011284	48				
3.	Date of filing/registration in Florida	4.	-	-	Document number				
5. (a	Holloway Law, P.A.								
. (4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 4114 W. San Juan Street				:				
	Registered Office Address (MUST BE FLORIDA STREET	ADDR	<u>EŞS)</u>			2022 851	اب		
	Tampa, FI	3362	9		- 6		י - מוד		
(b)	BPM SOLUTIONS, LLC								
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :					ي .	أتعيدنا		
	1605 S ALEXANDER ST								
	NEW Registered Office Address:								
	SUITE #102								
	PLANT CITY F	L	3						
chang agent was/v	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	e regis iability of the	tere v cor limi	d office and npany, it is ted liability	I the business office hereby confirmed the company or as other the business of the business	of the regis hat the char	stered nge(s)		
	1100			Michael LaRosa, as COO of Managing Member Printed or typed name of signee					
_	Regnature of a member or authorized representative of a member			erime of 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 605, F.S. Or, if this document is being filed to mereby felled a change in the registered office address, I hereby confirm that the limited liability company has been notified in priving of this change.

es CFO of R.A. ature of Registered Agent

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