L10000127349

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EXAMINER



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COVER LETTER

TO:

Registration Section
Division of Corporations

SHRIFCT

FIDELITY REALTY & 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:

RICK CHEHAB

Name of Person

FIDELITY REALTY & TITLE, LLC

Firm/Company

1070 Grove Park Circle

Address

Boynton Beach, FL 33436

City/State and Zip Code

Rick@FidelityRealtyTitle.com

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

For further information concerning this matter, please call:

Rick Chehab

__561<u>_350-5999</u>

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

FIDELITY REALTY & TITLE, LLC

ALCONO STATE OF THE PARTY OF TH (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compar	ny were filed on 12/13/2010	and assigned
Florida document number <u>L10000127349</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lis	ability company here:	
The new name must be distinguishable and end with the words "Li "L.L.C."	mited Liability Company," the desig	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		···
(Principal office address MUST BE A STREET ADDRESS)	·	
Fatou and moiling address if anniholds		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
Manning address Mill BETTT OST OTTTOE BOTH		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida st	reet address
		orida
	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 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>		Type of Action
MGRM	NOOR T. CHEHAB	1070 Grove Park Circle	Add
		Boynton Beach, FL 33436	Remove
			_
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			Add
			Add _ Remove
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			Remove
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<u> </u>			Remove
			-
			Add
			Remove

D. If amending any other information,	, enter change(s) here: (Attach additional sheets, if necess	sary.)
		···
		<u> </u>
November 07	2012	
	re of a member or authorized representative of a member	
Mr. Riád €hehab		
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00