

OCT/24/2017 11:14 AM

FAX No.

P. 001

10/24/2017

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H17000279955 3)))



H170002799553ABCC

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : WOOD, BUCKEL AND CARMICHAEL, PLLC  
Account Number : 120170000051  
Phone : (239)552-4100  
Fax Number : (239)263-7922

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: Lane@wbc-lawyers.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
T.L.J. TITLE COMPANY, LLC

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$60.00

2017 OCT 24 PM 1:35

FILED  
17 OCT 24 AM 9:42  
FLORIDA  
DIVISION OF STATE  
CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

S. WARREN

OCT 25 2017

OCT/24/2017/TUE 11:14 AM

FAX No.

P. 002

((H17000279955 3)))

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: TLJ Title Company, 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:

C. Lane Wood, Esq.

\_\_\_\_\_  
Name of Person

Wood, Buckel and Carmichael, PLLC

\_\_\_\_\_  
Firm/Company

2150 Goodlette Road North, Sixth Floor

\_\_\_\_\_  
Address

Naples, FL 34102

\_\_\_\_\_  
City/State and Zip Code

lane@wbclawyers.com

\_\_\_\_\_  
E-mail Address (to be used for future annual report notification)

For further information concerning this matter, please call:

C. Lane Wood

239

552-4100

\_\_\_\_\_  
Name of Person

at (\_\_\_\_\_) \_\_\_\_\_  
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

((H17000279955 3)))

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

(((H17000279955 3)))

TLJ Title Company, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Foreign Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/26/2011 and assigned  
Florida document number L11000010841

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Customers First Title Company, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

100 Executive Drive

3rd Floor, Suite 330

Miramar Beach, FL 32550

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

100 Executive Drive

3rd Floor, Suite 330

Miramar Beach, FL 32550

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Wood, Buckel and Carmichael, PLLC

New Registered Office Address:

2150 Granddette Road North, Sixth Floor

*Enter Florida street address*

Naples

City

Florida 34102

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 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 the change.*



If Changing Registered Agent, Signature of New Registered Agent



D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

(((H17000279955 3)))

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

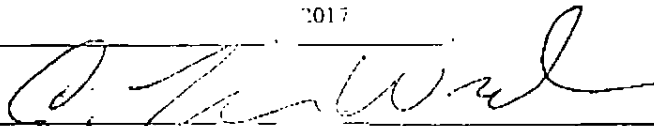
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated October 24

2017



Signature of a member or authorized representative of a member

C. Lane Wood, Manager

Typed or printed name of signee

FILED  
17 OCT 24 AM 9:42  
CLERK OF STATE  
TALLAHASSEE, FLORIDA