

| (Re | equestor's Name) | |
|---|--------------------|-------------|
| (Address) | | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL. |
| (Bu | siness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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SECRETARY OF STAIL
ALLAHASSEE, FLORING

COVER LETTER

TO: Registration Section
Division of Corporations

SURJECT: HOUSE OF TITLE, L.L.C

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:

JESSICA L. MARTINEZ

Name of Person

HOUSE OF TITLE, L.L.C

Firm/Company

4031 AVALON PARK EAST BLVD

Address

ORLANDO, FL 32882

City/State and Zip Code

JESSICA@HOUSEOFTITLE.COM

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

For further information concerning this matter, please call:

JESSICA MARTINEZ

...407

418-0100

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

■ \$25 Filing Fce

■ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited liability company: HOUSE OF TIT | TLE, L.L.C |
| 2. (a) Principal office address of limited liability con | • • |
| (Note: MUST BE STREET ADDRESS) | ORLANDO FL 32828 |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | 4031 AVALON PARK EAST BLVD ORLANDO FL 32828 |
| (Antick Maria BET OBT OT TICE BOX) | |
| 03/25/2011 | L11000035925 |
| 3. Date of filing/registration in Florida | 4. Document number |
| 5. (a) Registered Agent and Registered Office show | n on the records of the Florida Dept. of State: |
| Registered Agent: | MARTINEZ, JESSICA L |
| Registered Office Address: | 1969 S. ALAFAYA TRAIL SUITE 151 ORLANDO FL 32828 |
| - | |
| - | AH. NOV |
| (b) Enter name of NEW Registered Agent and/or | NEW Registered Office address |
| NEW Registered Agent: | MARTINEZ, JESSICA L |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 4031 AVALON PARK EAST BLVD, |
| | ORLANDO CF,FL 32828 |
| If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the chan the members of the limited liability company or as of the operating agreement of the limited liability company or as of the operating agreement of the limited liability company or as of t | the Florida street address of the registered office identical. Or, in the case of a Florida limited age(s) was/were authorized by an affirmative vote of nerwise provided in the articles of organization or |
| JESSICAL MARTINEZ | |
| Printed or typed name of signee I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of all Chapter 608, F.S. Or, if this document is being filed address. I hereby confirm that the limited liability considered agent | and agree to act in this capacity. I further agree to he proper and complete performance of my duties, ny position as registered agent as provided for in to merely reflect a change in the registered office npany has been notified in writing of this change. |

FILING FEE: \$25.00

INHS18 (05/08)

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