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N. Cuttigan JUL 142011

COVER LETTER

TO: Registration S Division of Co		: '	·				
SUBJECT:	TitleAu	ction.com LLC					
Sebster.		ted Liability Company					
	f Amendment and fee(s) are sub ondence concerning this matter	_					
		Charles Lam Name of Person					
		Firm/Company					
13490 Old Livingston Road							
		Address	·· ·				
	•	Naples, FL 34109					
		City/State and Zip Code					
	· ad	admin@itgholdings.com					
E-mail address: (to be used for future annual report notification)							
For further information	concerning this matter, please of	eall:					
C	Charles Lam	at (_239_)	514-4484				
Name	of Person	Area Code & Daytin	ne 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 enclose	Sectificate of Status & Certificate Copy (additional copy is enclosed)				
MAILING ADDRESS:		STREET/COURIER ADDRESS:					

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

... TO:

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

ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION **OF**

JUL 13 AM 11:09 SECRETARY OF STATE

TitleAuction.com LLC TALLAHASSE

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

The Articles of Organization for this L	imited Liability Company we	re filed on	04/08/2011	and assigned		
Florida document numberL11	1000042476					
This amendment is submitted to amend	d the following:					
A. If amending name, enter the new	v name of the limited liabilit	y company here:				
The new name must be distinguishable as	nd and with the words "I imited	Liability Company	"the designation "LLC	" or the abbreviation		
"L.L.C."	nd end with the words Limited	Liability Company,	the designation LLC	or the abbreviation		
Enter new principal offices address,	if applicable:			<u> </u>		
(Principal office address MUST BE A	A STREET ADDRESS)					
	-		<u>,</u>			
Enter new mailing address, if applic	ahle:					
(Mailing address MAY BE A POST (-	- - " -		- 		
B. If amending the registered ag	ant and/or registered office	address on our	records enter the	name of the new		
registered agent and/or the new registered		audress on our	records, enter the	name of the new		
Name of New Registered Ag	ent:					
New Registered Office Addr	<u>ess</u> :	F /	F1 11 11			
		Enter Florida street address				
	(City	, Florida	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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action** Address <u>Title</u> Name | MGR Harold E. Melle 2903 W. New Haven Avenue ✓ Add Remove #351 Melbourne, FL 32904 USA ☐ Add Remove ☐ Add ∏ Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary July 8 2011 Dated _ gnature of a member or authorized representative of a member Charles H. Lam Typed or printed name of signee

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Filing Fee: \$25.00