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T. BROWN

COVER LETTER

	egistration Secivision of Corp		*	*
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SUBJECT	reedom:	Title & Escrow Compa	any, LLC	
		Name of Lim	ited Liability Company	
The enclose	ed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please retui	rn all correspor	ndence concerning this matter	to the following:	
		Tiffany M. Henderso	on	
			Name of Person	
		Freedom Title & Esc	crow Company, LLC	
			Firm/Company	
		133 South Old Dixie	Highway	
			Address	
		Lady Lake, FL 3215	59	
			City/State and Zip Code	
		tiffany@freedomtitled		
			to be used for future annual report notifi	cation)
For further	information co	ncerning this matter, please co	all:	
Tiffany N	И. Henders	on	352 633-5195	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for the	e 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

ARTICLES O	F AMENDMENT	ACCANASSIONISSON
	TO	· · · · · · · ·
ARTICLES OF	ORGANIZATION	510. KA
	OF	19/10 P/10 P/10
	-	Apple PA
Freedom Title & Escrow Company, LL	.c	و جهر الرازي
(Name of the Limited Liability Cor	mpany as it now appears on our records	S) Sold of the second of the s
(A Florida Limit	ted Liability Company)	ORIE
The Articles of Organization for this Limited Liability Compa	any were filed on 9/12/2011	and assigned
Florida document number L11000103702		
i ionda document number		
This amendment is submitted to amend the following:		
A. If amanding name, antar the naw name of the limited is	iahility aammany kassa	
A. If amending name, enter the new name of the limited li	iadinty company here:	
The new name must be distinguishable and end with the words "Limited I	Liability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
	·	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		·
B. If amending the registered agent and/or registered		, enter the name of the new
registered agent and/or the new registered office address h	<u>nere</u> :	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	•
	Linei Fioriaa sireei aaaress	
	, , , , , , , , , , , , , , , , , , , ,	rida
	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 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 this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Actio
AMBR	Eric C. Linn	7301 Otter Creek Court	□ Add
		Yalaha, FL 34797	■ Remove
			□ Add
			Remove
			
			Add
			□ Remove
		 	···
<u> </u>			Add
			□ Remove
			□ Add
			Remove
			Remove

If amending any other i	nformation, enter chang	ge(s) here: (Attac	ch additional sheets	s, if necessary.)
7				
				
		<u> </u>	<u> </u>	
			· · · · · · · · · · · · · · · · · · ·	
Effective date, if other to The effective date must be spectified the date this document is filed	han the date of filing:		nd cannot be more than	_(optional) 90 days after
Dated February 25		015		
	Signature of a memb	er or authorized renu	resentative of a membe	r
	90)		
Tiffany M. H	lenderson	ed or printed name of		

Page 3 of 3

Filing Fee: \$25.00