

L11000142774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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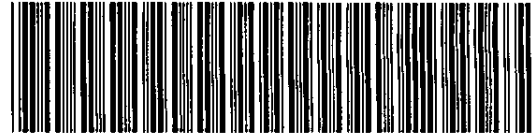
(Business Entity Name)

(Document Number)

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2013 AUG -7 AM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

B. BOSTICK

AUG - 8 2013

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RESEARCH EXPRESS 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:

FRANK J YORE

Name of Person

RESEARCH EXPRESS TITLE, LLC

Firm/Company

931 MONROE DR, SUITE A-102319

Address

ATLANTA, GA 30308

City/State and Zip Code

FRANK.YORE@RESEARCHEXPRESSTITLE.COM

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

For further information concerning this matter, please call:

FRANK J YORE

Name of Person

at (**850**) **570-0808**

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

2013 AUG -7 AM 11:34
OFFICE OF THE CLERK
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

RESEARCH EXPRESS TITLE, LLC

(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 Company were filed on 12/21/2011 and assigned
Florida document number L11000142774.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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This amendment is submitted to amend the following:

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

The new name must be distinguishable and end with 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)

931 MONROE DR, SUITE A-102319

ATLANTA, GA 30308

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

931 MONROE DR, SUITE A-102319

ATLANTA, GA 30308

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:

ALBERT C PENSON

New Registered Office Address:

1435 EAST PIEDMONT DR, SUITE 101

Enter Florida street address

TALLAHASSEE

City

, Florida 32308

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.


Albert C. Penson
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	JOEY YORE	6171 N SHERIDAN RD	<input type="checkbox"/> Add
		CHICAGO, IL 60660	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

2013 AUG -7 ALLAHASSEE, FLORIDA

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

• ADD JOEY YORE AS MEMBER (SAME ADDRESS AS ABOVE)

ADD KAREN H YORE AS MEMBER (USE MONROE DR ADDRESS)

Dated JULY 17

2013

Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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