10/6/2017

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.

(((H17000263623 3)))



H170002636233ABC/

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 : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)444-4977

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CLOSING & TITLE SERVICES, LLC

> Certificate of Status Certified Copy 0 Page Count 04 Estimated Charge \$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

10/8/17

\$3.1

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLOSING & TITLE SERVICES, LLC		
(Name of the Limited Liability Com (A Florida Limite	ipany as it now appears on our recorded Liability Company)	ls.)
The Articles of Organization for this Limited Liability Compa	ny were filed on 08/21/2012	and assigned
Florida document number L12000107770		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited Lis	<u></u>	·
The new name must be distinguishable and contain the words "Limited Lis	ability 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)	·	<u> </u>
		美型 3 3
		SSE O M
Enter new mailing address, if applicable:	<i>t</i> .	
(Mailing address MAY BE A POST OFFICE BOX)		5: -
	 	25 Z
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he	office address on our records ere:	s, enter the name of the ne
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:		
	Enter Florida street addres	5
		orida
	்ற	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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ANDRES JENDER VALIDO	5301 BLUE LAGOON DRIVE	
		9th FLOOR	■ Remove
		MIAMI, FL 33126	☐ Change
MGR	NEDELE GONZALEZ BRITO	ONZALEZ BRITO 5301 BLUE LAGOON DRIVE	Add
		9th FLOOR	□ Remove
		MIAM1, FL 33126	□ Remove
			☐ Remove
		<u> </u>	Change
		· · · · · · · · · · · · · · · · · · ·	Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
			Change
-			D Add
			☐ Remove
			Change

EAY No

P OOA

			·		

	<u> </u>				
<u> </u>				_	
		· · · · · · · · · · · · · · · · · · ·		AFE SECT	
				OCT -6	<u>T</u>
				SSEE A	— [1]
				<u> </u>	O
				SEE 7	
				<i>₽</i> 3	-
					
				 _	
					
n effective date is listed, the <u>fe:</u> If the date inserted in	nan the date of filing:date must be specific and can in this block does not meet on the Department of State	not be prior to date of filing the applicable statutory i	or more than 90 days after	ional) or filing.) Pursuan is date will not	t to 605.02 be listed
record specifies a d he 90th day after t	elayed effective date he record is filed.	e, but not an effectiv	e time, at 12:01	a.m. on the	earlier
red 10/05	Signatur of mem	2017.	tive of a member		

Page 3 of 3

Filing Fee: \$25.00