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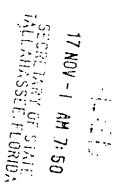
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

TO: Registration S Division of Co			
Coast-to-C	Coast Title & Escrow Services, I	LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Brandon Livingston		
		Name of Person	<u> </u>
	Coast to Coast Title & Esc	row Services, LLC	
		Firm/Company	
	10863 Park Blvd. N., Suite	: 10	
		Address	
	Seminole, FL 33772		
		City/State and Zip Code	<u> </u>
	brandon@ctctitleco.com		
	E-mail address: (to be used for future annual report notif	ication)
For further information	concerning this matter, please co	all:	
Brandon Livingston	_	727 538-4228 at ()	
Name	of Person	Area Code Daytime	: Telephone Number
Enclosed is a check for t	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 tadditional 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

iny as it now appears on our record Liability Company)	<u>s.</u>)
were filed on $\frac{01/29/2013}{}$	and assigned
ility company here:	
hity Company," the designation "LLC	" or the abbreviation "L.L.C."
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Suite 10	17 SEU 7.LI
Seminole, FL 33772	<u> </u>
10863 Park Blvd. N.	ASSECTION OF THE PROPERTY OF T
Suite 10	Pars.
Seminole, FL 33772	0RD)
ffice address on our records <u>e</u> :	s, enter the name of the new
Enter Florida street addres	5
	rida _
City	Zip Code
	ility company here: iiiy Company here: iiiy Company," the designation "LLC 10863 Park Blvd. N. Suite 10 Seminole, FL 33772 10863 Park Blvd. N. Suite 10 Seminole, FL 33772 ffice address on our records e: Enter Florida street address . Florida street address

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>	<u>Address</u>	Type of Action
MGR	Gina Burtron	11296 54th Avc. N.	∃ Add
		St. Petersburg FL 33708	Remove
			Change
			Add
			Remove
			Change
			Remove
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ective date, if other than the date of filing:		((ptional)	*0*
effective date is listed, the date must be specific and cannot te: If the date inserted in this block does not meet the	applicable statutory	g or more than 90 days filing requirements	after filing.) Pursu , this date will ne	ant to 605. of be liste
nument's effective date on the Department of State's r	ecords.			
record specifies a delayed effective date, be held to be after the record is filed.	out not an effect	ive time, at 12:0)1 a.m. on th	e earlie
ed October 31 2017				
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00