L1300052985

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PILL ED

J. HARRIS

COVER LETTER

TO:	Registration Se Division of Cor	ection porations	., · · · · •	n	¥ .,
en o		Land Title, LLC	•		
SUBJE	ECT:		nited Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	1	
Please	return all correspo	ondence concerning this matter	to the following:		
		Janice Sapp			
			Name of Person		
	ì	Panhandle Land Title, LL	c		
	1		Firm/Company		
		124 E. Virginia Ave			
			Address		
		Bonifay, FL 32425			
			City/State and Zip Code		
		panhandlelandtitle@gmail.			
	,	E-mail address: (to be used for future annual report notif	fication)	
For fur	ther information c	oncerning this matter, please c	all:		
Janice	Sapp		850 547-2025		
	Name o	f Person	Area Code Daytime	e Telephone Number	_
Enclose	ed is a check for th	ne following amount:			
\$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing F Certificate of Certified Copy (additional copy)	Status &

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 ARTICLES OF ORGANIZATION **OF**

Panhandle Land Title, LLC	
(Name of the Limited Liability Company as it now appears on our (A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability Company were filed on	and assigned
Florida document number L13000052985	
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 contain the words "Limited Liability Company," the designation	ra 🚄 . <u></u> .
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	\$ N P==
	SER S
	FIGURE TO THE PARTY OF THE PART
Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	D
B. If amending the registered agent and/or registered office address on our re	ecords, enter the name of the ne
registered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street	address
	, Florida

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
MGRM	Emory R. Estes, Jr.	612 Rustin Drive	
		Chipley, Florida 32428	■ Remove
			Change
MGR	Jan Sapp	PO Box 73	
`		Bonifay, Fl, 32425	
			Change
			Add
	Ý		□ Remove
			☐ Change
			Add
			Remove
			☐ Change
			
			TALL AHAS
			SSEE CHAP
			Add Remove
			☐ Change

amending any other informa-	tion, enter change(s) here: (Attach addition	mai sneeis, ij necessary.j
<u> </u>		

<u></u>		
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fective date, if other than the in effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the De	t be specific and cannot be prior to date of filing or mo ock does not meet the applicable statutory filing	(optional) ore than 90 days after filing.) Pursuant to 605.02 g requirements, this date will not be listed a
record specifies a delayed The 90th day after the reco	l effective date, but not an effective ti ord is filed.	ime, at 12:01 a.m. on the earlier
	2017	
June 22 ted	 -	
ated June 22	· · · · · · · · · · · · · · · · · · ·	
nted June 22	, Las	of a member
nted June 22 Marie L	Signature of a member or authorized representative	of a member
Michael L. Sapp	Signature of a member or authorized representative	of a member ALCAL ALLAL
Marie L	, Las	of a member IALLAHAS
Marce L	Signature of a member or authorized representative	of a member SECRE TARY C ALLAHASSEE
Marie L	Signature of a member or authorized representative	SECRETAR ALLAHASS