

L14000013197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100258411551

04/04/14--01030--001 \*\*25.00

FILED  
2014 APR -4 PM 12:32  
CLERK OF STATE  
TALLAHASSEE FLORIDA

APR 07 2014  
D. BRUCE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Title Bridge, 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:

Shelly Blanchard  
Name of Person  
The Title Bridge, LLC  
Firm/Company  
1217 South US Hwy 17-92  
Address  
Longwood, FL 32750  
City/State and Zip Code  
Shelly @ The titlebridge.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shelly Blanchard at (407) 810-0229  
Name of Person 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

FILED  
2014 APR - 4 PM 2:02  
TALLAHASSEE, FL

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

The Title Bridge, 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 1/24/14 and assigned  
Florida document number L14000013197.

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)**

1217 South US Hwy 17-92  
Longwood, FL 32750

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

1217 South US Hwy 17-92  
Longwood, FL 32750

**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:**

Shelly Blanchard

**New Registered Office Address:**

1217 South US Hwy 17-92

Enter Florida street address

Longwood

City

Florida

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.

Shelly Blanchard  
If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>mGR</u>	<u>Thomas L Lovett</u>	<u>140 Wigwam Place</u>	<input type="checkbox"/> Add
		<u>Maitland, FL 32751</u>	<input checked="" type="checkbox"/> Remove
<u>mGR</u>	<u>Shelly Blanchard</u>	<u>1217 South US Hwy 17-92</u>	<input checked="" type="checkbox"/> Add
		<u>Longwood, FL 32750</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED  
 2014 APR-4 PM 12:32  
 CLERK OF STATE  
 TALLAHASSEE FLORIDA

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

---

---

---

---

---

E. Effective date, if other than the date of filing: 4/1/14 (optional)  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 4/1, 2014

Shelly Blanchard  
Signature of a member or authorized representative of a member  
Shelly Blanchard  
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED  
2014 APR -4 PM 12:32  
CLERK OF STATE  
TALLAHASSEE FLORIDA

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

---

---

---

---

---

E. Effective date, if other than the date of filing: 4/1/14 (optional)  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 4/1 2014

Shelly Blanchard  
Signature of a member or authorized representative of a member  
Shelly Blanchard  
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED  
2014 APR -4 PM 12:32  
CLERK OF STATE  
TALLAHASSEE FL 32304