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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MiAMI 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:
GENTLE BALNETT Name of Person
MiAMI TITLE LLC Firm/Company
MISMINGTON AME. #370 MISMING BEACH Address EC. 33139
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
GENTLE BARNETT at (954) 67.9-3567 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status 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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MiAMI TITLE, LIC-			
(Name of the Limited Liability Company as it now appears of (A Florida Limited Liability Company)	our records.)		
The Articles of Organization for this Limited Liability Company were filed on 6	18/201	and ass	igned
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 desi	ignation "LLC" or th	e abbreviation "l	L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
	-		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered office address on or	ur records, <u>ente</u>	er the name	of the new
registered agent and/or the new registered office address here:		140 SECR Talea	
Name of New Registered Agent:		<u> </u>	E
New Registered Office Address:		10 SSE	19142
Enter Florida	street address	유 유 유	Trees had
City	, Florida _	Zin Code	
New Registered Agent's Signature if changing Degistered Agent:		D C S	

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	Name A	Address	Type of Action
MGR	David DAYAN	555 WASHINGTON AVE. #370	
		Address SSS WASHINGTON AVE. #370 MIANI BEACH FL. 33139	Remove
			
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	date, if other than the date of filing:
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the date this	document is filed by the Florida Department of State)
	document is filed by the Florida Department of State) 12/8/14 DEC. 8, 2014

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIE