L15000003806

(Re	equestor's Name)	,
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Registration Section
Division of Corporations

FAIRWA' SUBJECT:	TER TITLE COMPANY LLC		
SUBJECT:	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:	
	Megan Norvell		
		Name of Person	
	Megan Norvell		
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	706 Brack Road		
		Address	-
	Fort Pierce, Florida 34982		
		City/State and Zip Code	
	fairwatertitle@g.mail.com		
	E-mail address: (to be used for future annual report notif	ication)
For further information	concerning this matter, please ca	all:	
Megan Norvell		772 485-2729 at ()	
Name	of Person	Area Code Daytime	e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2015 OCT 23 PM 1: 46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

· ***

FAIRWATER TITLE COMPANY LLC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Ciability Company)
he Articles of Organization for this Limited Liability Company lorida document number L15000003806	
nis amendment is submitted to amend the following: If amending name, enter the new name of the limited liab	ility company here:
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	601 SE Port St Lucie Boulevard
Principal office address MUST BE A STREET ADDRESS)	Port St Lucie, Florida 34984
Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	601 SE Port St Lucie Boulevard Port St Lucie, Florida 34984
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City 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>	<u>Address</u>	Type of Action
MGR	Feliciano Higuera	601 Se Port St Lucie Boulevard	≅ Add
		Port St Lucie, Florida 34986	□ Remove
			Change
			
			🗅 Remove
			Change
			Add
			☐ Remove
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	 	,	Add
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			Add
			Remove
			Change

			□ Remove
			☐ Change

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			2015 1380 1380
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ffective date, if other than tl	November 1, 26	015 (optional ate of filing or more than 90 days after filing	23 23
an effective date is listed, the date m	aust be specific and cannot be prior to d	ate of filing or more than 90 days after filing statutory filing requirements, this dat	g.) Pursuant to 6020207 (3)(b
ocument's effective date on the		statutory ming requirements, this dat	e will not be used as the
			ာ်
e record specifies a delay The 90th day after the re		n effective time, at 12:01 a.m	on the earlier of:
october 22	, 2015		
Myur No	Sighature of a member or authorize	Danue Welle, and representative of a member	ains
Megan Norvell		Pamela Williams	
	Typed or printed na	ame of signee	

Page 3 of 3

Filing Fee: \$25.00