

115000096875

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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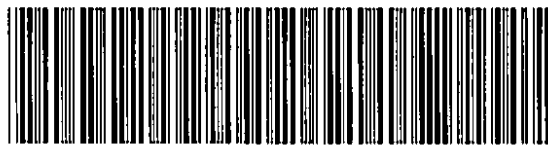
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: World Class Title Agency of Ohio, LLC
Name of Limited Liability Company

Dear Sir, or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kelley Saverzoff
Name of Person

World Class Title Agency of Ohio LLC
Firm/Company

5040 Pine Creek Drive
Address

Westerville, OH 43081
City/State and Zip Code

Kelley@worldclasstitle.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mandy Sargel at (614) 882-8037
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: World Class Title Agency of Ohio, LLC

2. (a) 5040 Pine Creek Drive

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Westerville, OH 43081

(b) 5040 Pine Creek Drive

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

Westerville, OH 43081

3. 09/10/2015
Date of filing/registration in Florida

4. L15000096875
Document number

5. (a) Florida Incorporated

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

619 Cattlemen Rd.

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Ste. 155

Sarasota

FL 34232

(b) National Registered Agent Inc.

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

1200 South Pine Island Road

NEW Registered Office Address:

Plantation

FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

KELLY SAWYER
Printed or typed name of signer

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.

[Signature] Ryan Underwood, Assistant Secretary
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00