## L16000 174 335

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	<del></del>
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	





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## **COVER LETTER**

TO: Registration So Division of Coa			
DESTINA	TION TITLE, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Destini Townsend		
		Name of Person	<del></del>
	DESTINATION TITLE, I	LC	
		Firm/Company	
	1089 W. Morse Blvd., Ste	. В	
		Address	
	Winter Park, FL 32789		
		City/State and Zip Code	
	destini@destinationtitlefl.co		
	E-mail address; (	to be used for future annual report notif	leation)
For further information c	oncerning this matter, please ca	all:	
Destini Townsend		407 269-8945 at ()	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Fifing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

. 1

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**

DESTINATION TITLE, LLC		and the last D Paris
(Name of the Lin	nited Liability Company as it now	npany)
	(A Fiorida Limned Liability Con	real DRY OF STATE
The Articles of Organization for this Limited Plorida document number 116000174335	Liability Company were filed	I on September Le Parties SEE. FLORIUA and assigned
1 16000174335	chamis company were med	and assigned
Florida document number L16000174335	·	;
This amendment is submitted to amend the fo	Howing:	
A. If amending name, enter the new name	of the limited liability comp	any here:
The new name must be distinguishable and contain the	words "Limited Liability Company	y," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	
Principal office address MUST BE A STRE	EET ADDRESS)	
		<u> </u>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	E DOV	
printing address MAT BE A POST OF FICE	<u> </u>	
	<del></del>	
		ess on our records, enter the name of the
		ess on our records, enter the name of the
		ess on our records, enter the name of the
egistered agent and/or the new registered (		
egistered agent and/or the new registered of New Registered Agent:	office address here:  JOHNSON REAL ESTAT	E LAW, PA
egistered agent and/or the new registered (	office address here:  JOHNSON REAL ESTAT  1089 W. Morse Blvd., Ste.	E LAW, PA
Name of New Registered Agent:	Office address here:  JOHNSON REAL ESTAT  1089 W. Morse Blvd., Ste.	E LAW, PA . B outer Florida street address
Name of New Registered Agent:	office address here:  JOHNSON REAL ESTAT  1089 W. Morse Blvd., Ste.	E LAW, PA

## New Registered Agent's Signature, if changing Registered Agent:

DESTINATION TITLE, LLC

Thereby 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

Page 1 of 3

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	Jeremy S. Sloane	100 S. Orange Ave., Ste. 1000	_
		Orlando, FL 32801	D Add
			■ Remove
			Change
MGR	Brian A. Watson	100 S. Orange Ave., Stc. 1000	
		Orlando, F1, 32801	
			≅ Remove
			Change
			□ Remove
			Change
-			□ Add
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			Change

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recoi The 9	rd specific Oth day a	es a delayed fter the reco	l effective o ord is filed.	date, but n	ot an effec	tive time, at	: 12:01 a.m.	on the earlier o
ned	Aug	was	8	2010				
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Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee