4800 264227

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
L		

Office Use Only



800322840208

01/14/19--01035--017 **25.00

2019 JAH I U A & 39

JAN 18 283

T. LEMIEUX

COVER LETTER

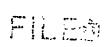
то:	Registration Security Division of Cor						
erm re		SING TITLE SERVICES LLC					
SUBJE	CI:	Name of Limited Liability Company					
The enc	losed Anicles of	Amendment and fee(s) are sub-	mitted for filing.				
Please r	eturn all correspo	ndence concerning this matter	to the following:				
		BRITO, HEIDI A					
			Name of Person				
			Firm/Company				
		201 CRANDON BLVD, S	UITE 728				
			Address				
		KEY BISCAYNE, FL 331	49				
		ORDERS@POSTCLOSER	City/State and Zip Code S.COM				
		E-mail address: (1	to be used for future annual report notifi	cation)			
For furt	her information co	oncerning this matter, please ca	all:				
HEIDI	A BRITO		786 427-1001 at () Area Code Daytime				
	Name o	f Person	Area Code Daytime	Telephone Number			
Enclose	d is a check for th	e 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



POST CLOSING TITLE SERVICES LLC	2019 JAN 14 A 段 39
(Name of the Limited Liability Con	ipany as it now appears on our records.)
(A Florida Limite The Articles of Organization for this Limited Liability Compa	
The Articles of Organization for this Limited Liability Compa	ny were filed on and assigned
Florida document number L18000264227	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited li</u>	ability company here:
The new name must be distinguishable and contain the words "Limited Li	ability 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)	
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
R. 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 h	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City 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.

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

Title	<u>Name</u>	Address	Type of Action
MGR	GARCIA. MADELYN	11645 NW 11 STREET	
		PEMBROKE PINES, FL 33026	■ Remove
			☐ Change
			Add
			☐ Remove
			☐ Change
		Add	
			Remove
			Change
		Add	
			Remove
			Change
		□ Remove	
			☐ Change
			☐ Add
			☐ Remove
			□ Change

•	
•	
	
Note:	ive date, if other than the date of filing: (optional) fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as them; s effective date on the Department of State's records.
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	JANUARY 1ST 2019
	Signature of a member or authorized representative of a member

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00