6/7/22, 2:10 PM

Division of Corporations

19548277645



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN EXPETITLE CLOSING SERVICES, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$55.00

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Expetitle Closing Services, LLC		
(Name of the Limit	ed Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Li Florida document number L19000228661	ability Company were filed on September 10, 2019	and assigned
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
The Real Title Closing Services, LLC		
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applic (Principal office address MUST BE A STREE		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
B. If amending the registered agent and/or ragent and/or the new registered office address Name of New Registered Agent:	egistered office address on our records, enter thes here: C T Corporation System	e name of the new registered
New Registered Office Address:	1200 South Pine Island Road	July 3
	Enter Florida street address	
		da 33324 ≥ 55€
	City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	÷ 48

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.

CT Corporation System by Kaity Toon, Asst. Secy.

If Changing Registered Agent. Signature of New Registered Agent

To: Page: 4 of 5

MGR = Manager

2022-06-07 12:11:18 PDT

19548277645

From: Kaity 1

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
			□Add	
			□Remove	
			□Change	
			□Add	
			□Remove	
			Change	
			□ Add	
			Remove	
			☐ Change	
				
		ПRетюче		
			□Change	
			□ Rеточе	
			🗀 Change	
			🗆 🗅 Add	
			Remove	

D. If amending any other inf	ormation, enter change(s) here:	(Attach additional sheets, if necessary.)
<u> </u>		
		<u> </u>
·		
Note: If the date inserted in	ate must be specific and cannot be prior to	(optional) date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3)(b) le statutory filing requirements, this date will not be listed as the
If the record specifies a delayed e record is filed	ffective date, but not an effective tim	e, at 12:01 a.m. on the earlier of: (b). The 90th day after the
Dated	2022	- ·
/s/ Sean C. Da		
	Signature of a member or authori	zed representative of a member
Sean C. Daly, Di	rector	

Typed or printed name of signee