

L19000265071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

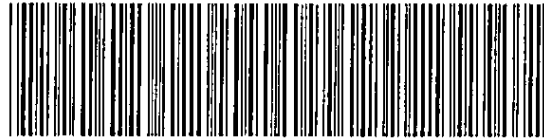
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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RECEIVED

2020 APR 23 PM 4:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

2020 APR 23 AM 3:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y SUILKER

APR 28 2020



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 24, 2020

CORPORATE ACCESS, INC.

SUBJECT: FIRST FEDERAL TITLE & ESCROW LLC
Ref. Number: L19000265071

We have received your document for FIRST FEDERAL TITLE & ESCROW LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Document number on your application belongs to TITLE VENTURE MANAGEMENT LLC

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 320A00008541

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 4/23 Glinda

- ☐ **CERTIFIED COPY** _____
- XX** **PHOTOCOPY** _____
- ☐ **CUS** _____
- XX** **FILING** AMEND _____

1. **FIRST FEDERAL TITLE & ESCROW LLC**
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FIRST FEDERAL TITLE & ESCROW LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on APRIL 7, 2020 and assigned Florida document number L19000265071.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

LOAN CLOSING EXPERTS LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

4365 VENETIA BLVD

(Principal office address MUST BE A STREET ADDRESS)

JACKSONVILLE, FL 32210

Enter new mailing address, if applicable:

4365 VENETIA BLVD

(Mailing address MAY BE A POST OFFICE BOX)

JACKSONVILLE, FL 32210

B. 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 here:

Name of New Registered Agent:

MICHAEL J. BARKER

New Registered Office Address:

4365 VENETIA BLVD

Enter Florida street address

JACKSONVILLE

Florida

City

32210

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	CHARLES R. WOOD	12428 SAN JOSE BLVD, SUITE 2	<input type="checkbox"/> Add
		JACKSONVILLE, FLORIDA 32223	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MICHAEL J. BARKER	12428 SAN JOSE BLVD, SUITE 2	<input type="checkbox"/> Add
		JACKSONVILLE, FLORIDA 32223	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Title Venture <i>Managment LLC</i>	4365 Venetia Blvd.	<input checked="" type="checkbox"/> Add
		Jacksonville, FL 32210	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(If an effective 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 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Signature of a member or authorized representative of a member

Micah J. Baker
Typed or printed name of signee

Filing Fee: \$25.00