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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF
TALLAHASSEE

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D. BRUCE
NOV 03 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Private Client Title & Escrow, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elaine Hawkins

Name of Person

Private Client Insurance Services, LLC

Firm/Company

9736 Commerce Center Ct.

Address

Fort Myers, FL 33908

City/State and Zip Code

ehawkins@pcis-fl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elaine Hawkins

239 481-1949
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TALLAHASSEE, FL

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Private Client 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 8/24/2020 and assigned
Florida document number L20000261200.

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

9736 Commerce Center Ct.

Fort Myers, FL 33908

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9736 Commerce Center Ct.

Fort Myers, FL 33908

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:

Elaine Hawkins

New Registered Office Address:

9736 Commerce Center Ct.

Enter Florida street address

Fort Myers

Florida 33908

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.


Elaine Hawkins
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>
MGR	David Ciccarello	15499 Thory Ct.	<input type="checkbox"/> Add
		Fort Myers, FL 33908	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Elaine Hawkins	9736 Commerce Center Ct.	<input checked="" type="checkbox"/> Add
		Fort Myers, FL 33908	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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HALLANDALE BEACH, FL

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STONHAM, N.H.
TALLAMASTER, JR.

2020 SEP 28 PM 7:37
SECTION 101
ITALIANO SECT 101

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(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.

Dated September 24 2020


Signature of a member or authorized representative of a member

Elaine Hawkins

Typed or printed name of signee

Filing Fee: \$25.00