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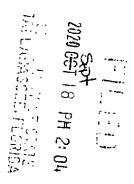
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## **COVER LETTER**

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FIETH AV	ENUE TITLE SERVICES LLO	С .		,4.#* .v	
	Name of Lim	ited Liability Company			
Articles of	Amendment and fee(s) are sub	omitted for filing.			
all correspo	ndence concerning this matter	to the following:			
	Thomas M. Tarsia				201
		Name of Person		17	- 950°
	Jones, Haber & Rollings				
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	1633 SE 47th Terrace				PH 2
		Address			2: 04
	Cape Coral, FL 33904			5	آخ <u>ر</u>
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	tarsia@joneshaberlaw.com				
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iformation c	oncerning this matter, please c	all:			
l'arsia		239	542-0700		
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	Articles of all corresponding Address of the Corresponding Fee Ming Fee Mistration Spision of Co. Box 632	Articles of Amendment and fee(s) are subtall correspondence concerning this matter.  Thomas M. Tarsia  Jones, Haber & Rollings  1633 SE 47th Terrace  Cape Coral, FL 33904  tarsia@joneshaberlaw.com  E-mail address: (aformation concerning this matter, please of farsia  Name of Person  check for the following amount:  Tiling Fee	Articles of Amendment and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:  Thomas M. Tarsia  Thomas M. Tarsia  Name of Person  Jones, Haber & Rollings  Firm/Company  1633 SE 47th Terrace  Address  Cape Coral, FL 33904  City/State and Zip C  tarsia@joneshaberlaw.com  E-mail address: (to be used for future and stormation concerning this matter, please call:  Tarsia  Name of Person  Tarsia  Street  Certificate of Status  Certified Copy (additional copy is played). Box 6327  The	Sign of Corporations	Articles of Amendment and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:  Thomas M. Tarsia  Name of Person  Jones, Haber & Rollings  Firm/Company  1633 SE 47th Terrace  Address  Cape Coral, FL 33904  City/State and Zip Code  tarsia@joneshaberlaw.com  E-mail address: (to be used for future annual report notification)  afformation concerning this matter, please call:  Farsia  Name of Person  Area Code  Daytime Telephone Number of the following amount:  Stiling Fee  330.00 Filing Fee & Certified Copy (additional copy is enclosed)  Certificate of Status  Certificate Of Status  Street Address: Registration Section Fision of Corporations Box 6327  Registration Section Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIFTH AVENUE TITLE SERVICES 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 August 26, 2020 and assigned Florida document number L20000266284 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 5TH AVENUE TITLE SERVICES LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC 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) 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: New Registered Office Address: Enter Florida street address , Florida \_

## 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

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

Manager
 Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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fective date, if other than effective date is listed, the ote: If the date inserted in ocument's effective date o	date must be specific a n this block does no	and cannot be price of meet the appli	icable statutory	or more than 90 d filing requireme	_ (optional ays after filing ents, this date	g.) Pursuant	to 605,020 e listed a
record specifies a delayed is filed.	effective date, but r	iot an effective	time, at 12:01	a.m. on the earli	er of: (b) T	he 90th day	after the
September 4	— <u> </u>	2020	—· / )				
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Filing Fee: \$25.00