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COVER LETTER

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TO:

SUBJECT:	Lea	d Title, LLC					
301111.011		Name of Lim	ited Liability Company				
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		Lilia Biberman					
			Name of Person				
		Page 17 Page 20 Page 2					
	Elad Title, LLC Name of Limited Liability Company ed Articles of Amendment and fee(s) are submitted for filing. m all correspondence concerning this matter to the following: Lilia Biberman Name of Person Lead Title, LLC Firm/Company 12762 Tuipwood Cir, Address Boca Raton, FL 33428 City State and Zip Code closings@leadtitlellc.com E-mail address: (to be used for tuture annual report notification) information concerning this matter, please call: a Biberman Name of Person 1 (561) 352-4576 Daytine Telephone Number a check for the following amount. Filing Fee Stoop Filing Fee & Certificate of Status Certificate Copy (additional copy is enclosed) Registration Section Division of Corporations						
	Name of Limited Liability Company closed Articles of Amendment and fee(s) are submitted for filing. return all correspondence concerning this matter to the following: Lilia Biberman Name of Person Lead Title, LLC Finn/Company 12762 Tuipwood Cir, Address Boca Raton, FL 33428 City State and Zip Code closings@leadtitlellc.com E-mail address: to be used for future annual report notification) ther information concerning this matter, please call: Liia Biberman Name of Person Area Code Daytine Telephone Number ed is a check for the following amount: 5.00 Filing Fee Certificate of Status Certified Copy Ladditional copy is enclosed Mailing Address: Registration Section Registration Section						
		Lead Title, LLC					
		Boca Raton, Fl	Name of Limited Liability Company and and fee(s) are submitted for filing. meering this matter to the following: Lilia Biberman Name of Person Lead Title, LLC Finn/Company 12762 Tuipwood Cir, Address Boca Raton, FL 33428 City State and Zip Code Closings@leadtitlellc.com E-mail address: (to be used for luture annual report notification) this matter, please call: at (561) Area Code Daytime Telephone Number and amount: .00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, certificate of Status & Certified Copy padditional copy is enclosed) Certified Copy Certified Copy				
			City State and Zip Code	elephone Number S60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) on Orations			
		closings@leadtit	telle.com to be used for future annual report note	fication)			
For further in	formation c						
Liia	Bibermar	1	at (561) 352-45	576			
	Name o	f Person		e Telephone Number			
Enclosed is a	check for th	ne following amount:					
X ∃ \$25.00 F	iling Fee		Certified Copy	Certificate of Status & Certified Copy			
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_							
	. Box 632						
Tal	lahassee, I	*L 52514	2415 N. Monro	e Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Lead Title, LLC				
(<u>Name of the Limited L</u> (A F	iability Compan lorida Limited Li	y as it now appears on o ability Company)	ur records.)	<u>"</u>
The Articles of Organization for this Limited Liabil florida document number <u>L22000060486</u>	ity Company v 	vere filed on 02/04	1/2022	and assigned
This amendment is submitted to amend the following	ig:			
A. If amending name, <u>enter the new name of the</u>	limited liabil	ity company here:		
The new name must be distinguishable and contain the words	"Limited Liabilit	y Company," the designa	tion "LLC" or the abb	previation "L.L.C."
Enter new principal offices address, if applicable	·:	12762 Tulipwoo	od Cir,	<u> </u>
Principal office address MUST BE A STREET A	DDRESS)	Boca Raton, FL	33428	
Control was a siling and decree of appolicable.		12762 Tulipwo	ood Cir	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Boca Raton F		·· ···
	<u>-7</u>			
B. If amending the registered agent and/or regis agent and/or the new registered office address he		ddress on our record	ls, <u>enter the nam</u>	of the new registered
Name of New Registered Agent:	Lilia	Biberman		
New Registered Office Address:	12762 Tulip	owood Cir Enter Florida sti	vet address	
_	Boca Rato		, Florida _ 30	3428
		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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Nikoleta Barr	18744 Ocean Mist Drive	□Add
		Boca Raton, FL 33498	XlRemove
			□Change
			□ Add
			□Change
			□Add
			□Remove
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<u>ite:</u> If t	date, if other ive date is listed, the date inserte is effective dat	ed in this block	does not me	eet the applic	cable statutor	ng or more than y filing requir	(option 90 days after fements, this	n al) iling.) Pursuant t date will not b	o 605,020 e listed as
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