

# L 23000257315

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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

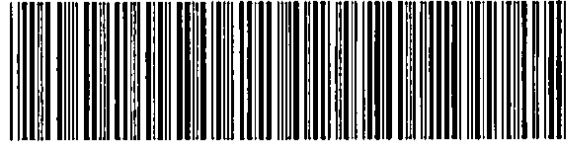
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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FILED  
2023 MAY 30 AM 17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

VH

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PCG Title Insurance Agency 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:

Evelyn A. Lopez  
Name of Person

PCG Title Insurance Agency LLC  
Firm/Company

1580 Sawgrass Corporate Pkwy #130  
Address

Sunrise FL 33323  
City/State and Zip Code

Evelyn@pcghelps.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Evelyn A. Lopez at ( 954 ) 604.8552  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee      ☐ \$30.00 Filing Fee & Certificate of Status      ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)      ☐ \$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

PCG Title Insurance Agency LLC

**If Changing Registered Agent, Signature of New Registered Agent**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

### Type of Action

1580 Sawgrass Corporate Pkwy. X Add  
#130  
Sunrise FL 33323 ☐ Remove

☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change☐ Add☐ Remove☐ Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

7700

2023 MAY 30 AM 17  
SECONDARY OF SILE  
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: 6/27/2023 (optional)

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

5/27/23

Signature of a member or authorized representative of a member

Hector Rivas

Typed or printed name of signee