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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

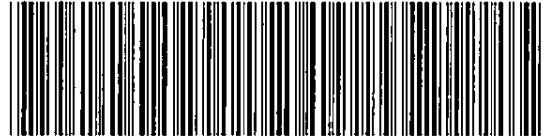
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RECEIVED  
2024 MAY 21 AM 8:31  
CLERK OF SUPERIOR COURT

RECEIVED  
2024 MAY 21 PM 2:05  
CLERK OF SUPERIOR COURT  
HARRIS COUNTY, TEXAS



May 22, 2024

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir/Madam,

I, Melissa A. Daniels, CEO of Emerald National Title, LLC, hereby authorize Emerald Title of Florida, LLC a Florida limited liability company, to use the company name "Emerald National Title, LLC" for its operations in the state of Florida.

Emerald Title of Florida, LLC, is a subsidiary of Emerald National Title, LLC, a Delaware limited liability company and as such, we grant them full permission to operate under this name to maintain consistency and brand recognition across our national operations.

Please process this authorization at your earliest convenience. Should you require any further information or documentation, please do not hesitate to contact me directly at 469243-5643 or [melissa@emeraldnt.com](mailto:melissa@emeraldnt.com).

Thank you for your assistance in this matter.

Sincerely,

Melissa A. Daniels

CEO

Emerald National Title, LLC

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

Emerald Title of Florida, 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 01/11/2024 and assigned  
Florida document number L24000071148

This amendment is submitted to amend the following:

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

Emerald National Title, 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:**

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

FILED  
2024 MAY 21 AM 8:31  
CLERK OF CIRCUIT COURT  
JACKSONVILLE, FLORIDA

**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

*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>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

[illegible]

E. Effective date, if other than the date of filing: \_\_\_\_\_ (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 05/21/2024 \_\_\_\_\_

/s/ Melissa Daniels

Signature of a member or authorized representative of a member

Melissa Daniels

Typed or printed name of signee

**Filing Fee: \$25.00**