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Examiner's Initials

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. (Corporation Name) 2. (Corporation Name)	(Document #)	· _
3. (Corporation Name)	(Document #)	÷
4. (Corporation Name) Walk in Pick up time Mail out Will wait NEW FILINGS Profit Not for Profit	(Document #) Certified Copy Photocopy Certificate of Status AMENDMENTS Amendment Resignation of R.A., Officer/Director	-
☐ Limited Liability ☐ Domestication ☐ Other OTHER FILINGS	Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION	<i></i>
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	

CR2E031(7/97)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the limited liability company is: TITLE MATTES, LLC
2. The mailing address of the limited liability company is: 301 CLEMATIS ST.
SUITE 3000, WEST PAUN BEACH, FC 3340
298000001374
3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: RA ROBERT J. KANTIAN Name 294 COROUNA PD.
Address Address GELD BOACH, FL 33441 City, State and Zip Address City, State and Zip
6. The name and address of the new registered agent and/or office:
RA ROBORT J. KANTIAN / TITLE MARCIS
301 CLOMATIS ST SUITE 3000
Florida street address (P.O. Box NOT acceptable)
WEST PALM BOACHEL 33401
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of a majority of the members of the limited liability company or as otherwise provided in the articles of organization or the regulations of the limited liability company.
(Signature of a member or authorized representative of a member)
(Printed or typed name of signee)
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. 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.
(Signature of Registered Agent)
Division of Corporations P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$35.00