M0600000216

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400304248464

400304248464 10/08/17--01027--010 **60.00

17 OCT = 6 PH 4: 15

O SIMMONS



October 4, 2017

SENT VIA FEDEX

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Application by Foreign Limited Liability Company to File Amendment to Certificate of Authority to Transact Business in Florida
Forsythe Appraisals, LLC (Document No. M06000000216)

Dear Sir or Madam:

Enclosed please find the Application by Foreign Limited Liability Company to File Amendment to Certificate of Authority to Transact Business in Florida, along with the filing fee of \$60.00 (Check No. 47500044) and supporting documents.

Please return a filed copy to:

Leila Conrad 4 First American Way Santa Ana, CA 92707

If you have any questions, please contact the undersigned at (714) 250-2163 or leconrad@tirstam.com.

Sincerely,

Leila Conrad Paralegal

Homes

Enclosures

COVER LETTER

ГО:	Registration Se Division of Co				
SUBJE	CCT:	Forsythe	Appraisa	s, LLC	<u> </u>
		Name of Foreig	n Limited Liabil	ity Compai	ny
Dear Si	ir or Madam:				
The end	closed applicati	on, certificate and fee(s)	are submitted fo	r filing.	
Please	return all corres	pondence concerning thi	s matter to the fo	ollowing:	
Leila	a Conrad				
		Name of Person			
First	t America	ın			
		Firm/Company			
4 Fi	rst Ameri	can Way			
		Address			
San	ta Ana, C	A 92707			
		City/State and Zip Code	;		
		stam.com			
E-ma	iil address: (to l	be used for future annual	report notification	on)	
For furt	ther information	n concerning this matter,	please call:		
Leila	a Conrad		at (714)	250-2	2163
	Name	of Person	· ·	& Daytime	Telephone Number
	STREET/CO Registration So Division of Co Clifton Buildir 2661 Executive Tallahassee, Fl	rporations ig e Center Circle		Registrat Division P.O. Box	NG ADDRESS: tion Section of Corporations t 6327 see, Florida 32314
	ed is a check fo Filing Fee	or the following amount \$\sum \$30\$ Filing Fee & Certificate of Status	: \$55 Filing Certified	•	■ \$60 Filing Fee, Certificate of Status & Certified Copy

TO:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	on the records of the Florida [Department of
State: Forsythe Appraisals, LLC		1151
Enter new principal office address, if applicable:	-	Department of St. 10CT - 6 PH
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
2. The Florida document number of this limited liab	ility company is: M06000	000216
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: Janu	uary 13, 2006	
SECTION II (5-9 complete only the applicable ch		
5. New name of the limited liability company: Fir (must	st American Staff App contain "Limited Liability Cor	oraisals, LLC npany, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted foopy of the written consent of the managers or manamust contain "Limited Liability Company," "L.L.C."	iging members adopting the al	ousiness in Florida and attach a ternate name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office add	officer address on our records	s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florid	a Street Address
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper a and accept the obligations of my position as register document is being filed to merely reflect a change in liability company has been notified in writing of this	stered Agent: and agree to act in this capac nd complete performance of n red agent as provided for in Ci the registered office address.	ity. I further agree to comply with by duties, and I am familiar with hapter 605, F.S. Or, if this

If the amendment	nt changes person, title or capacity in a	accordance with 605.0902 (1)(e), indicate that	change:
tle/ Capacity	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Remove
			Add
			Remove Olivionini Add 6
			Remove
			Add
			Remove
			Add
			Remove
aforementioned	rtificate, if required: no more than 90 amendment(s), duly authenticated by er the law of which this entity is organ	the official having custody of records in the	

Filing Fee: \$25.00

Typed or printed name of signee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF AMENDMENT OF "FORSYTHE APPRAISALS,
LLC", CHANGING ITS NAME FROM "FORSYTHE APPRAISALS, LLC" TO
"FIRST AMERICAN STAFF APPRAISALS, LLC", FILED IN THIS OFFICE ON
THE NINETEENTH DAY OF MAY, A.D. 2017, AT 10 O'CLOCK A.M.



Authentication: 203306782

Date: 09-28-17

3646184 8100 SR# 20176371145

State of Delaware
Secretary of State
Division of Corporations
Delivered 10:00 AM 05/19/2017
FILED 10:00 AM 05/19/2017
SR 20173812479 - File Number 3646184

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

	praisalS, LLC
	of Formation of the limited liability company is hereby a
as follows:	
	ame of the limited liability company by is First American Staff Appraisals,
LLC."	
i .	
IN WITNESS V	HEREOF, the undersigned have executed this Certific
IN WITNESS V	WHEREOF, the undersigned have executed this Certific day of May , A.D. 201
	-
	day of May, A.D. 201
	day of May , A.D. 201
	day of May, A.D. 201
	day of May , A.D. 201