Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE FREIBERT TITLE GROUP, LLC

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G. MCLEOD

NOV 25 2009

EXAMINER

.(((H09000247382 3)))

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	. Na	me of the limited liability company:	FREIBERT TITLE GROUP, LLC	
2	(a)	Principal office address of limited liability com	mpany: 4305 Low Trail Court	
	•	(Note: MUST BE STREET ADDRESS)	Louisville KY 40299	
	(b)	Mailing address of limited liability company:	4305 Low Trail Court	
		(Note: MAY BE POST OFFICE BOX)	Louisville KY 40299	
_		3/10/2009	M0900000966	
3.	Dat	te of filing/registration iπ Florida	4. Document number	\Box
5.	(a)	Registered Agent and Registered Office shown	•	DIVISION
		Registered Agent:	CT CORPORATION SYSTEM &	물문
		Registered Office Address:	1200 South Pine Island Road	무
		Registered Office Address.	1200 South Pine Island Road Plantation FL 33324	$\mathbb{Z}^{\frac{1}{2}}$
			P	CORP
			8	ORATIO
	(b)	Enter name of NEW Registered Agent and/or	r NEW Registered Office address:	프
		NEW Registered Agent:	National Corporate Research, Ltd., Inc.	2
		BURNATA A A A A A A A A A A A A A A A A A A		
(MUST BE FLORIDA STREET ADDRESS)		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	515 East Park Avenue	
			Tallahassee FI, 32301	
tha off he lia lin	at after control after the con	cer the change or changes are made, the Florida so of the registered agent will be identical. Or, in the confirmed that the change(s) was/were authorized company or as otherwise provided in the article liability company.	r the laws of the State of Florida, it is hereby confirme street address of the registered office and the busines the case of a Florida limited liability company, it is zed by an affirmative vote of the members of the limi- cles of organization or the operating agreement of the	S
(Sig	natur	e of a member or authorized representative of a member)		
(Pr	inted o	WANN L. FRETSYSOLST or typed name of signoce)		
			and agree to act in this capacity. I further agree to be proper and complete performance of my duties, and the registered agent as provided for in Chapter 6 ct a change in the registered office address, I hereby tified in writing of this change.	l I 08,
(Sig	naturo	Janky Lyt Petrona Varela/Assyst.	h sect,	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

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