## M19000006626

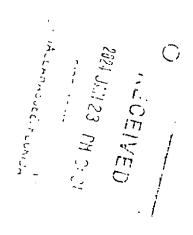
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates o	f Status
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Special Instructions to Fil	ling Officer:	
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Office Use Only



500421822335







CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 280237 8437499

AUTHORIZATION : Graduate Control of the control of the

CERTIFIED COPY

XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

EXAMINER'S INITIALS:

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	ame of the limited liability company: CONSTRUCT	TITLE CC	MPANY, LLC				
2 (a)		(h	)				
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Ma	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  ch St. #1200			
	401 Church St. #1200		401 Church				
	Nashville, TN 37219		Nashville, T	N 37219			· · · · · · · · · · · · · · · · · · ·
	07/08/2019		M190000066	26			
3.	Date of filing/registration in Florida	4.	D	ocument	number		
5. (a)							
J. (a)	Englistered Agent and Registered Office shown on the records o	of the Florida	Dept. of State:				
	CT CORPORATION SYSTEM						
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS	<u> </u>			.13	
	1200 SOUTH PINE ISLAND ROAD		-				
	PLANTATION	33324				نه. دن دن	
	· · · · · · · · · · · · · · · · · · ·		<del>,</del>		Y OF STAT		<i>;</i>
(b)					S.	$\frac{\pi}{\omega}$	
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office ad	dręss:			PH 3: 29	
	Corporation Service Company				F-1	9	
	NEW Registered Office Address:						
	1201 Hays Street		<del> </del>				
	Tallahassee	32301					
change agent was/w the art	limited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ill Cilmi	e registere liability co of the lim e limited li	d office and t impany, it is h ited liability c ability compa cilmi, Authoriz	he busine ereby cor ompany any. ed Perso	ess office offirmed to or as oth	of the that the erwise	registered change(s) provided in
Signa	tture of a member or authorized representative of a member		P	rinted or ty	ped name	of signe	<u> </u>
provisa the obj to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this change.	gree to act e performa ed for in C hereby co	in this capaci nce of my dut hapter 605, F nfirm that the	ty. I furti les, and i S. Or, i limited l	her agre l am fam f this doc iability c	e to co viliar w cument compar	mply with the ith and accept is being filed by has been
77	ace Cokuble						
- әідпан	ire of Registered Agent						

Grace E. Kirby, Asst. Vice President Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

**FILING FEE: \$25.00** 

INHS18 (2/14)