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SECRETARY OF STATE
TALLAHASSEE, FLORID;

Coullierte JUL 1 2 2007

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Precise Title Services, Inc. (Name of Corporation)
DOCUMENT NUMBER: PO10000 69742
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Reina A. Cobo (Name of Contact Person)
Precise T: He Services, Inc. (Firm/Company)
14411 South Dixic Highway, Suite Z20 (Address)
Palmetto Bay, Florida 33176 (City/State and Zip Code)
For further information concerning this matter, please call:
Reina A. Cobo at (205) 238-9556 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the inge is submitted for a corporation organized under the laws of the State of $\mathbf{\Xilocic}$ in the State of Florida.	A
1. The name of t	the corporation: Precise Title Services, Inc.	
2. The principal	office address: 14411 South Dixie Highway Suite 2 to Bay, Fl. 33176	20
	ddress (if different):	
4. Date of incorp	poration/qualification: 07/21/2007 Document number: PO10000	169742
	I street address of the current registered agent and registered office on file with the trment of State:	
	12169 South Dixie Highway	97 SEI
	Pinecrest, FL. 33154	JUL - CRETA
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office	SSEE.
		T.0
	14411 South Dixie Highway, Suite 220 (P.O. Box NOT acceptable)	I: 53 STATE LORIDA
	Palmetto Bay, FL. 33176	
The street addre as changed will	ess of its registered office and the street address of the business office of its registere be identical.	ed agent,
Such change wa	as authorized by resolution duly adopted by its board of directors or by an officer so he board, of the corporation has been notified in writing of the change.	•
Juna (Signati	re of an officer or director) (Printed or typed name and title)	o fres.
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete perj d I am familiar with and accept the obligation of my position as registered agent. C ng filed merely to reflect a change in the registered office address, I hereby confirm s been notified in writing of this change.	formance Or, if this that the
Leuin	gnature of Registered Agent) (Date)	
If signing on be	half of an entity:	
Reina	yped or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *

CR2E045 (8/05)

APPROVE