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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SUPREME TITLE	EINC					
DOCUMENT NUMB							
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.					
Please return all corres	pondence concerning this ma	uter to the following:					
	Thomas C. Santoro						
-		Name of Contact Person	11				
:	Supreme Title Inc.						
-		Firm/ Company	<del>-</del>				
	1700 Wells Road Ste 5						
-	_	Address					
(	Orange Park, FL 32073						
-		City/ State and Zip Cod	e				
annette	e@santoro-law.com						
		sed for future annual report	notification)				
For further information	concerning this matter, pleas	se call;					
Thomas C. Santoro		904 at (	278-8713				
Name of Contact Person		Area Co	de & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:				
■ \$35 Filling Fee	□\$43.75 Fiting Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

SUPREME TITLE INC.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P01000086406	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida Statutes, this <i>F</i> its Articles of Incorporation:	Iorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addressed new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
<u></u>	
(Florida stree	t address)
New Registered Office Address:	, Florida
(0	Tiy) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with a signature of New Registered agent.	th and accept the obligations of the position.  A S S S S S S S S S S S S S S S S S S
	The state of the s

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jones		
X Add	<u>SV</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	V		Trina Larsen	1700 Wells Road Suite 5
X Add				Orange Park, FL 32073
Remove				
2) Change	<u>s</u>		Elizabeth Rouse	1700 Wells Road Suite 5
X Add				Orange Park, FL 32073
Remove				
3 ) Change		_		
Add				
Remove				
4)Change		_		
Add				-
Remove				
5) Change		_		
Add				
Remove				<del></del>
6) Change		_		
Add				
Remove				

f amending or adding additional Art Attach additional sheets, if necessary),	(Be specific)			
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f an amendment provides for an exch provisions for implementing the ame	ange, reclassification	on, or cancellatio	n of issued shares,	
(if not applicable, indicate N/A)	nument ii not conta	inied in the amen	ument itsett.	
			<del></del>	
<del></del>				
		_		
				<del>-</del>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date if applicable:  (no more than 90 days after amendment file date)	<del></del> _
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated May 29, 2018	
Signature	
(By a director, president or other officer – if directors or officers have not been	
selected by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Thomas C. Savitoro	
(Typed or printed name of person signing)	
President	
(Title of person signing)	<del></del>