P02000015678

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Concept Title Services, Inc. (Name of Corporati	ion)
DOCUMENT NUMBER: P02000075678	
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:
André E. Fial (Name of Contact Pe	los
(Name of Contact Fe	rson)
Law Offices of Patricia O. (Firm/Company)	Espinosa, P.A.
2263 S.W. 37th A (Address)	Avenue
Coral Gables, Flor (City/State and Zip C	rida 33145 Code)
For further information concerning this matter, please call:	
Patricia O. Espinosa at ((Name of Contact Person)	305) 448-5252 Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of	f 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

CR2E045 (8/05)

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, this ange is submitted for a corporation organized under the laws of the State of Florida are to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Concept Title Services, Inc.
2. The principal	office address: 2263 S.W. 37th Avenue
Coral Gab	les, Florida 33145
3. The mailing a	address (if different):
4. Date of incorp	poration/qualification: 07/11/2002 Document number: P02000075678
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Patricia O. Espinosa, Esq
	232 Andalusia Avenue, Suite 370
	Coral Gables, Florida 33134
6. The name and (if changed):	Patricia O. Espinosa, Esq. 2263 S.W. 37th Avenue (P.O. Box NOT acceptable) Coral Gables, Florida 33145 ess of its registered office and the street address of the business office of its registered agent.
	Patricia O. Espinosa, Esq.
	2263 S.W. 37th Avenue (P.O. Box NOT acceptable)
	2263 S.W. 37th Avenue (P.O. Box NOT acceptable) Coral Gables, Florida 33145
The street addre	ess of its registered office and the street address of the business office of its registered agents be identical.
	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
Solic (Signation	ia O. ESPINOSA ure of an officer or director) PATRICIA O. ESPINOSA (Printed or typed name and title)
I hereby accept I further agree 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 performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
Satu	cia C. Espusosa 3/11/09 gnature of Registered Agont) (Date)
If signing on be	chalf of an entity:
	Typed or Printed Name)

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