P02000087235

TO: Amendment Section Division of Corporations

SUBJECT: Florida Title Solutions, Inc.
(Name of corporation)

DOCUMENT NUMBER: PO200087235

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:

Debra L. Zelman
(Name of person)

Florida Title Solutions, Inc.
(Name of firm/company)

900007192129----08/19/02--01027--011 *****35.00 ******35.00

P.O. Box 550893 (Address)

Ft. Caude date, FL 33355 (City/state and zip code)

For further information concerning this matter, please call:

Debra Zelwar at (954) 236-9144
(Name of person) (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 409 E. Gaines Street Tallahassee, FL 32399 02 AUG 19 PM 12: 42
SECRETARY OF STATE

CR2E045(07/02)

R.A. change

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,	
this statement of change is submitted for a corporation organized under the laws of the State of Flor Oa in order to change its registered office or registered agent, or both, in the State	
of Florida	₽.
1. The name of the corporation: Florida Title Solutions, Inc.	-
2. The principal office address: 8000 Peters Rd, #A 200	
plantation, FL 33324	- ,,,
3. The mailing address (if different): P.O. Box 550893	
Ft. Landerdale, FL 33355	
4. Date of incorporation/qualification: 890000872	<u>3</u> 5
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	~
Debra L. Zelman	
10400 S. Lake Vista Circle	پرک
Davie FL 33328	4
6. The name and street address of the new registered agent (if changed) and /or registered office at the changed):	À
Debra L. Zelman	
PETERS ROL # A 200 (P.O. Box or personal mailbox NOT acceptable)	
Plantation, FL 33324	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	} _
(Signature of an officer charifnan or vice chairman of the board) Debra L. Zelweun, Preside w (Printed or typed name and title)	3
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
(Signature of Registered Agent) (Date)	
If signing on behalf of an entity:	
(Typed or Printed Name) (Capacity)	

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