

PD3000009850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500182615575

06/29/10--01018--005 \*\*35.00

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 JUN 29 AM 11:29

Rd/ch  
@ 6/30/10

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Sterling Title Agency, Inc.  
Name of Corporation

DOCUMENT NUMBER: P03000009850

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:

Tim A. Shane, Esq  
Name of Contact Person

Firm/Company

4400 N. Federal Highway, Suite 210-21  
Address

Boca Raton, FL 33431  
City/State and Zip Code

natalie@sterlingtitle.org  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Natalie Goodwin at ( 561 ) 886-5576  
Name of Contact 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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Sterling Title Agency, Inc.  
2. The principal office address: 4400 N. Federal Highway, Suite 210-21  
Boca Raton, FL 33431  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 1/27/2003 Document number: P03000009850

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Tim A. Shane, Esq.  
621 N.W. 53rd. Street, Suite 420  
Boca Raton, FL 33431

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Tim A. Shane, Esq  
4400 N. Federal Highway, Suite 210-21  
P.O. Box NOT acceptable  
Boca Raton, FL 33431

FILED  
STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA  
10 JUN 29 AM 11:29

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]  
Signature of an officer or director

Tim A. Shane, Esq  
Printed or typed name and title

*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]  
Signature of Registered Agent

6/25/10  
Date

If signing on behalf of an entity:

Tim A. Shane  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)