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| (Ci | ity/State/Zip/Phone | e #1 |
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| Certified Copies | Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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Amend MC Thewis 5-24-10

COVER LETTER

Division of Corporations NAME OF CORPORATION: KT TIHE SERVICES IM. DOCUMENT NUMBER: 1 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 19 SERVICES
Firm/Company MARLIO Kendall-Title. Com - AS of 8-12-2010 E-mail address: (to be used for future annual report notification) MARTIO KHLILLE. Com - Until 8-12-2010 For further information concerning this matter, please call: MARILY Kendall at (904) 230-1063 Ext202

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & □ \$52.50 Filing Fee ☐ \$43.75 Filing Fee & □ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

Articles of Amendment Articles of Incorporation

- ZOID HAY 21 A 9 24
TALLAHASEY DE Title SERVICES Inc. (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

| A. If amending traine, enter the new maine of the corporation | <u> </u> | |
|--|--|----------|
| KenDALL Title Services | Inc. | _The new |
| name must be distinguishable and contain the word "corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associations." | poration," "company," or "incorporated Torp," "Inc," or "Co". A professional co | |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | 12058 SAN JOSEBI | υQ. |
| | JACKSONVIlle, FL. 322 | 23 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 12058 SANTOSE BLU | 0 |

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

MARTHA J. KENDALL Name of New Registered Agent: New Registered Office Address:

SACKSONDINE (City)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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)

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--|---|--|------------------------------|
| PRES | MARLHA J KENDAIL | 1060 ORANGEWOODD ST Johns Florida 32259 | Add Remove |
| Vice Pers | Daniel Giannini | 1060 Orangewood RU ST Johns Florida 32259 | _ □ Y Add □ Remove |
| DEC TRES | MARYLA-TKEYDAU | 1060 Orangewood Rd ST Johns Flori QA 32259 | Add Remove |
| | ng or adding additional Articles, enter itional sheets, if necessary). (Be speci | | |
| | Change of Corp | | |
| | THE SERVICES INC | | |
| 170112 | THE LITER SCIENCE | 95 LVIC. | |
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| <u>provision</u> | endment provides for an exchange, rec s for implementing the amendment if applicable, indicate N/A) | | |
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| The date of each amendment | (date of adoption is required) |
|--|---|
| Effective date if applicable: | |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| | ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. |
| | ere approved by the shareholders through voting groups. The following statement and 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/we action was not required. | ere adopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/we action was not required. | ere adopted by the incorporators without shareholder action and shareholder |
| Dated_ | 0105,P1 YA |
| sel | y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) |
| | (Typed or printed name of person signing) |
| | PRES: DENT (Title of person signing) |