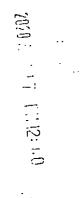
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TO: Amendment Section Division of Corporations

NAME OF CORPOI	RATION: United title Affiliat	es. Inc.	
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Leonard Vandermast		
		Name of Contact Person	
	United Title Affiliates, Inc.		
		Firm/ Company	
	429 Apollo Beach Blvd		
	-	Address	•
	Apollo Beach, Fl 33572		
		City/ State and Zip Code	
	Lvandermast@ussa1.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Leonard Vandermast		at (<u>813</u>	6799113
Name	of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	ES52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Centre of Tallahassee	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

United title Affiliates, Inc.				
(Name o	of Corporation as curren	tly filed with the Flor	rida Dept. of State)	
P04000087536				
	(Document Number	of Corporation (if kno	wn)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corpo	oration adopts the following amend	iment(s) to
A. If amending name, enter the new n	ame of the corporation:			
N/A			The r	iew
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc." or "Co".	A professional corpo	porated" or the abbreviation "Corp	o., "
B. Enter new principal office address,	if applicable:	N/A		
(Principal office address <u>MUST BE A S</u>			?{	_
				_
				_
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A		
(maning address <u>sort big (1 00)</u>	orrer non			_ `. _ ·
				<u></u>
D. If amending the registered agent ar			er the name of the	
new registered agent and/or the new	N/A	<u>33.</u>		
Name of New Registered Agent				
	(Florida .	street address)		
New Registered Office Address:	N/A		, Florida	_
		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	hanging Registered Age tered agent. I am familia	nt:		
	Simulation of Man	Danietorad tomic if -	hanaina	
	Signature of New	Registered Agent, if co	nanging	

Check if applicable

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.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.

X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	V		Heather A. Kersting	429 Apollo Beach Blvd
X Add				Apollo Beach, Fl 33572
Remove				
2) Change		_		<u> </u>
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional Ar Attach additional sheets, if necessary).	(Be specific)			
	_			
· -				
				_
		•		
				_
	-			
			·	
-				-
				•
f an amendment provides for an exc	change, reclassificatio	n, or cancellation of i	issued shares,	
provisions for implementing the am (if not applicable, indicate N/A)	endment if not conta	ined in the amendme	nt itself:	
(if not applicable, indicate N/A)				
				<u> </u>
			•	
			_	 ·

The date of each amendment(s) date this document was signed.	adoption:, if other than
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date will not be listed as Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	;··
	(voting group)
8-14-202 Dated	Leonard Vanden
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Leonard Vandermast
	(Typed or printed name of person signing)
	President
	(Title of person signing)

the

the