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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: AGENTS AND CORPORATIONS, INC

Phone

Account Number : 120010000112

: (302)575-0875

(302) 575-0925

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REGISTERED AGENT CHANGE TITLE OUTLET, INC.

| Certificate of Status | 0 |
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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 FLORIDA in order to change its registered affice or registered agent, or both, in the State of Florida. |
|---|
| 1. The name of the corporation: TITLE OUTLET, INC. 2. The principal office address: 12200 W Colonial Dr. Suite 203 12 When Counter FL 34787 |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: 6/9/2004 Document number: P04000069367 |
| The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, order resigned) |
| DAGMARIS MALDONADO |
| 10216 GLACIER CT. |
| ORLANDO, FL 32821 |
| 6. The name and street address of the new registered agent (if changed) and for registered office (if changed): |
| AGENTS AND CORPORATIONS, INC. |
| (if changed): AGENTS AND CORPORATIONS, INC. 300 FIFTH AVENUE SOUTH, SUITE 101-330 |
| NAPLES, FL 34102 |
| 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. |
| 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 dutter, 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 affice address. I hereby confirm that the corporation has been gottined in writing of this change. |
| |
| Symphoso or Dightered Agent of 3/22/10 Dec. It signing op behalf of an entity: John L. Williams Vice President Typed or Printed Plante |
| * * * FILING FEE: \$35.00 * * * |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE CRIZEOIS (803)