## P04000143036

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DIVISION OF CORPORATIONS
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## **COVER LETTER**

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Division of Corporations
SUBJECT: <u>Core Title Services</u> , <u>Inc.</u> (Name of corporation)
DOCUMENT NUMBER: \$0 4000 143 03 6
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:
Peter Albert (Name of contact person)  Core Title Services, Inc. (Firm/Company)
9931 Las Casas Drive
Fort Myers, Florida 33919 (City/state and zip code)
For further information concerning this matter, please call:
leter Albert at (239) 908-5626 (Name of contact person) at (439) (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

## 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 ofin order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Core Title Services, Inc.	
2. The principal office address: 9931 (as Casas Prive	
2. The principal office address: 9931 (as Casas Drive Fort Myers, Florida 33919	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/15/2004 Document number: 10 4000 143 036	<u>,                                     </u>
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
Tathryn T. O'Brien	365 H
1005 S.W. 51st Terrace	77
Cape Coral, Florida 33914	•
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Craig Terpening, JD	
1270 Wildwood Cakes Boulevard, #303 (P.O. Box NOT acceptable)	
Maples, Florida 34104	
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 or director)  (Printed or typed name and title)	
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.	
(Date)	
If signing on behalf of an entity:	
(Typed or Printed Name)	

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