P05000064631

	• •	3.0
(Red	questor's Name)	
(Ado	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	> #̂)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300071512743

84/24/85--01059--013 **35.00

06 APR 24 PM 1:48
SECRETARY OF STATE
TALL AHASSEE FI CHIE

I Samu

100 2 7 Fills

MD

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Piver City Titlo Inc. (Name of Corporation)
DOCUMENT NUMBER: P05000 64631
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:
Phyliss Price (Name of Contact Person)
River City Title Inc.
9439 Son Jose Bluch # 747. (Address)
City/State and Zip Code)
For further information concerning this matter, please call:
Phylliss Price at (904) 207-3013 (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: River City Title Inc.
2. The principal office address: Col96 Lake Gray Blad. Ste 115
3. The mailing address (if different): Same
4. Date of incorporation/qualification: Avil 39,3005 Document number: PO500000416
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Saskia Smith
9164 Shindler Crossing Dr.
Nacksonville, Fl. 32222
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Phylliss Price
9439 San Jose Blvd. #242 (P.O. Box NOT acceptable)
Jacksonville, H. 32257
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.
Stran Michael Pich
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.
Hydro Price (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Hylliss Price. (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)