## P05000155217

(Requestor's Name)
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(Business Entity Name)
(Document Number)
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## COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Signature Title Services, Inc. (Name of Corporation)
DOCUMENT NUMBER: PO5000155217
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:
Richard L. Ziff  (Name of Contact Person)
Signature Title Serviceds, Inc.
(Firm/Company)
1961 NW 150 Ave Suite 103
(Address)
Pembroke Pines, FL 33028
(City/State and Zip Code)
For further information concerning this matter, please call:
Richard I. Ziff at (954) 239-4545 (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  Street Address: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314



January 23, 2007

RICHARD L. ZIFF 1961 NW 150 AVE - SUITE 103 PEMBROKE PINES, FL 33028

SUBJECT: SIGNATURE TITLE SERVICES, INC.

Ref. Number: P05000155217

We have received your document for SIGNATURE TITLE SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 707A00005368

Irene Albritton Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

## 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	
1. The name of the corporation: Signature Title Services, Inc.	-
2. The principal office address: 1961 NW 150 Ave Suite 103	
Pembroke Pines, FL 33028	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 11/23/05 Document number: PO 5000155217	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
ZIFF, Richard L.	
5802 Tyler Street	
Hollywood, FL	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Richard L. Ziff.  1961 NW 150 Ave Suite 103  Pembroke Pines, FL 33028	THE TAR
Richard L. Ziff.	Jan.
	}
Pembroke Pines, FL 33028	_
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 combilition has been notified in writing of the change.  Richard I White or an officer or director.  Richard I White or typed name and title)	
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.  Section Registered Agents (Date)	
If signing on behalf of an entity:	
(Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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