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SECRETARY OF STATE
ANASSEE, FLORES

or hour

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Vineyard Title Fic. Name of Corporation
DOCUMENT NUMBER: 106000333333
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:
Colleen K. Kendel Name of Contact Person
Vineyard Title Inc.
433 Plaza Real Ste 275 Address
Boca Raton FL 33432 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Colleen Kendel at 5761 542-1485 Name of Contact Person 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 ofFLorida_
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Vineyourd Title Inc
2. The principal office address: 3700 Coconut Creek PKwy Stezo Coconut Creek FL 33066
3. The mailing address (if different):
SAME
4. Date of incorporation/qualification: 3/7/06 Document number: Po600033333
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Vineyard Title Inc.
3700 Coconut Creek Pkwy 5 201
Case of Case El 330/
COCONDA CLARA, LE SOUGO SE 5 E
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
H22 Plaza Peal Ste 275
P.O. Box NOT acceptable
Doca Katon, FL 33432
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.
Kallen a. Kusch Signature of an officer or director Kathleen A. Kirsch Printed 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.
Collean Harall Signature of Registered Agent Location Date Date
If signing on behalf of an entity:
Typed or Printed Name

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