

P07000014/66

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TALLAHASSEE, FLORIDA

2007 MAY -2 PM12:36

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Title Sense, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P07000014166

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:

Elena Contreras  
(Name of Contact Person)

Title Sense, Inc  
(Firm/Company)

6506 NW 56th St  
(Address)

CORAL SPRINGS, FL 33067  
(City/State and Zip Code)

For further information concerning this matter, please call:

Elena Contreras at (954) 903-8387  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

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: Title Sense, Inc.  
2. The principal office address: 6506 NW 56th St. Coral Springs, FL 33067

3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 1/30/07 Document number: P07000014166

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

6506 NW 56th St.  
Coral Springs, FL 33067

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

6101 W. Atlantic Blvd. # 202  
Marqate, FL 33063  
(P.O. Box NOT acceptable)

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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.

Elena Contreras  
(Signature of an officer or director)

Elena Contreras/President  
(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.

Elena Contreras  
(Signature of Registered Agent)

4/30/07  
(Date)

If signing on behalf of an entity:

Elena Contreras  
(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)