## P09000036084

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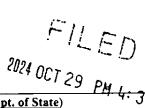
## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: VANTAGE POIN	r title, inc.						
DOCUMENT NUMB	P09000036084							
The enclosed Articles of	of Amendment and fee are sul	bmitted for filing.						
Please return all corresp	pondence concerning this ma	tter to the following:						
	Shelly White							
-	Name of Contact Person							
	VANTAGE POINT TITLE, INC.							
-		Firm/ Company						
	18167 HWY 19 N,Suite 300							
-	Address							
	Clearwater, Florida 33764							
-		City/ State and Zip Code	•					
	swhite@vptitle.net							
-	E-mail address: (to be us	ed for future annual report	notification)					
For further information	concerning this matter, pleas	se call:						
Shelly White		727 at (	340-0457					
Name o	f Contact Person	Area Code & Daytime Telephone Number						
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:					
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810						

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



VANTAGE POINT TITLE, INC.

(Name of Corporation	on as currently filed with the F	lorida Dept. of State)	4: 30
P09000036084		INTERPOLATION	E. Williams
(Docum	nent Number of Corporation (if k	nown)	LUNIDA
ursuant to the provisions of section 607.1006, Florida s Articles of Incorporation:	Statutes, this Florida Profit Con	poration adopts the follo	owing amendment(s)
If amending name, enter the new name of the co	orporation:		TT.
ame must be distinguishable and contain the word "co Inc.," or Co.," or the designation "Corp," "Inc.," chartered," "professional association," or the abbre	" or "Co". A professional con	orporated" or the abbrev poration name must co	The new viation "Corp.," ntain the word
. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u>		<u> </u>	
. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>		
. If amending the registered agent and/or register new registered agent and/or the new registered		iter the name of the	
Name of New Registered Agent		<u> </u>	
	(Florida street address)		
New Registered Office Address:		, Florida	
New Registered Office Made 653.	(City)		Zip Code)
lew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the	e obligations of the positi	ion.
Signa	ature of New Registered Agent, ij	changing	
Check if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Robert Jackson	18167 U.S. Hwy 19 N.
Add			3rd Floor
X Remove			Clearwater, FL 33764
2) Change	P	Natalie Moranda	18167 U.S. Hwy 19 N.
X Add			3rd Floor
Remove 3) Change			Clearwater, FL 33764
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(verme)	ending or adding additional Ar h additional sheets, if necessary).	(Be specific)	Refol nere.		
			<del></del>	<del></del>	
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lf an	amendment provides for an exc	change, reclassifi	cation, or cancell	ation of issued shar	es.
prov	visions for implementing the am	endment if not c	ontained in the a	mendment itself:	
	(if not applicable, indicate N/A)				
1					
1			<del>-</del>		

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	ach amendment(s) ac	loption:					, if other than the
date this docu	ment was signed.	ber i 5th, 2024					
Effective dat	e if applicable:						<del></del>
	•	(no	o more than 90 de	ays after amer	idment file date,	)	
	date inserted in this b			le statutory fil	ing requiremen	ts, this date wil	I not be listed as the
Adoption of	Amendment(s)	(CHEC	K ONE)				
	dment(s) was/were ado not required.	pted by the inco	rporators, or boa	rd of directors	s without shareh	older action and	d shareholder
	dment(s) was/were ado ureholders was/were su			ımber of vote	s cast for the am	nendment(s)	
The amend must be so	dment(s) was/were app eparately provided for	roved by the sha	areholders throug up entitled to vot	th voting grou e separately o	ps. The following the amendment	ng statement nt(s):	
'The	e number of votes cast	for the amendme	ent(s) was/were s	sufficient for a	ipproval		
by _							
		(voting g	zroup)				
	selected	irector, president d, by an incorpor ted fiduciary by	t or other officer rator – if in the hi that fiduciary)	- if directors ands of a rece	or officers have iver, trustee, or	not been other court	_
		$-\sum c$	24alie	_ mo	randa		<del></del>
		(Тур	ed or printed nar	ne of person s	igning)		F   1024 OCT
		Pres	sident		<u> </u>	 	
		(Title	e of person signi	ng)		ASSEE, FLORID	LED 29 PM 4: 30