P11000079013

(Re	equestor's Name)	
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DIVISION OF CORPORATIONS

C/5/15

COVER LETTER

TO: Amendment Section

Division of Corpo	prations		
NAME OF CORPOR	All Pro Tit	le, Inc.	
DOCUMENT NUME	BER: P110000790)13	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Marcia A. Bartle	Э у	
		Name of Contact Person	1
	All Pro Title, Inc		
		Firm/ Company	
	6451 Third Stre	et, Suite 1	
		Address	
	Rockledge, Flo	rida 32955	
		City/ State and Zip Code	e
ma	rcia@allprotitle	nat	
<u> </u>	•	sed for future annual report	notification)
	•	•	•
For further information	concerning this matter, pleas	se call:	
Marcia A. Bartley		at (321	255-2221
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Street	Address
Ame	ndment Section	Amendment Section	
Division of Corporations		Division of Corporations Clifton Building	
P.O. Box 6327 Tallahassee, FL 32314			executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

All Pro Title, Inc.

14 DEC 29 PM 1: 25

(Name of Corporation as currently fi	iled with the Flori	da Dept. of State)		
P11000079013				
(Document Number of	Corporation (if kn	own)		
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this <i>Flo</i>	rida Profit Corporation ado	pts the following	g amendment(s) to
A. If amending name, enter the new name of the co	orporation:			
				_The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	o, ""Inc, " or "Co"	'. A professional corporat	ated" or the al ion name must c	obreviation contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	e: DRESS)			
C. Enter new mailing address, if applicable:	- -			
(Mailing address <u>MAY BE A POST OFFICE BO</u>				
D. If amending the registered agent and/or registenew registered agent and/or the new registered	red office address office address:	in Florida, enter the name	e of the	
Name of New Registered Agent				
	(F)	- (
	(Florida street			
New Registered Office Address:	(City)	, Florida	(Zip Code)	•
New Registered Agent's Signature, if changing Registered agent. I hereby accept the appointment as registered agent.		and accept the obligations	of the position.	
Signature of N	lew Registered Age	nt if changing		

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)

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

 $P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO <math>\approx$ 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.

Example: 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	D	Christina B. Sutch	1730 PORPOISE STREET
Add			MERRITT ISLAND, FL 32955
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

dading in the control of the	icles, enter change(s) here: (Be specific)		
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•	FILED SECRETARY OF STATE DIVISION OF CORPORATIONS	
The date of each amendment(s) adoption:	DIVISION OF CORPORATIONS	, if other than th
date this document was signed.	44 BEO OO BM 1: 25	
Effective date if applicable:	14 DEC 29 PM 1: 25	
(no more tha	n 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)		
The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitled		
"The number of votes cast for the amendment(s) was/	were sufficient for approval	
by		
by		
The amendment(s) was/were adopted by the board of direct action was not required.	ors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incorporators vaction was not required.	vithout shareholder action and shareholder	
Dated December 23, 2014		
Signature	TV2/	
(By a director, president or other o	officer – if directors or officers have not been in the hands of a receiver, trustee, or other court eary)	_
Marcia A. Bartley		
(Typed o	or printed name of person signing)	
President		
	(Title of person signing)	