P14000055330

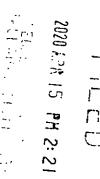
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: ECLAT TITLE AN	ND CLOSING SERVICES	CORPORATION		
	1BER: P14000055330				
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	Kevin K. Ross-Andino				
		Name of Contact Persor	1		
	eclat law LLP				
	-	Firm/ Company			
	307 Cranes Roost Boulevard	Suite 2010			
		Address			
	Altamonte Springs, Florida 3	2701			
		City/ State and Zip Code	e		
	kevin.ross@eclatlaw.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informat kevin k. ross-andino	ion concerning this matter, pleas	se call: at (407	636-7004		
Name	e of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	S43.75 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)		
	ailing Address		Address		
	mendment Section	Amendment Section			
	vision of Corporations O. Box 6327	Division of Corporations The Centre of Tallahassee			
	illahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ECLAT TITLE AND CLOSING SERVICES CORPORATION

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

(Name of Corporation as cu	rrently filed with the FI	orida Dent. of State)	
P14000055330		,	
(Document Nun	nber of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this <i>Florida Profit Cor</i>	poration adopts the following amendmen	t(s)
A. If amending name, enter the new name of the corporation	on:		
Wiltshire Legal Consulting Group, Inc.		The new	
name must be distinguishable and contain the word "corporatio "Inc.," or Co.," or the designation "Corp," "Inc.," or "Corpartered," "professional association," or the abbreviation	o". A professional cor	orporated" or the abbreviation "Corp.,"	
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	1	22	
			-
C. Enter new mailing address, if applicable:		5 5	•
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	==	[[•
		= = =	ز
		2	
			
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office ac		ter the name of the	
new registered agent and/or the new registered office ac	uuress.		
Name of New Registered Agent			
(Flor	rida street address)		
New Registered Office Address:		Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Albereby accept the appointment as registered agent. I am fan		obligations of the position.	
Signatus s No	New Registered Agent, if	Chamaina	
Signature of t	нев педыстей ядет, у	Countries	
Check if applicable			

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>	<u>John Doe</u>		
X Remove	<u>V</u>	Mike Jone	<u>·s</u>	
X Add	<u>sv</u>	Sally Smit	t <u>h</u>	
Type of Action (Check One)	<u>Title</u>	<u>N</u>	laine	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change			<u></u>	
Add				
Remove				4
4) Change		<u> </u>		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach <i>ada</i>	ng or adding add litional sheets, if	necessary). (Be specific)	- 			
 							
				*			
		 				·· ·· ··	
lf an amai	ndment provide:	e for an asabar	ana raplaccific	ation ar cancal	lation of icenae	charne	
provision	is for implement	ting the amend	lment if not co	ntained in the a	imendment itse	elf:	
(if no	t applicable, indi	icate N/A)					
							<u> </u>

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date vepartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action;	ind shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	, <u>,</u> ,"	
selecte	(voting group) The Color of the control of the color of	
	(Typed or printed name of person signing)	
	Chairman and Chief Executive Officer	
	(Title of person signing)	