P16000031721

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Amend

APR 2 8 2016 **ALB**RITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: FIRST TITLE GR	OUP INC	
DOCUMENT NUMB	ER:		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	ADRIANA MARQUEZ		
-		Name of Contact Persor	1
~ <u>-</u>	FIRST TITLE GROUP INC		
, -	,	Firm/ Company	
	7791 NW 46 ST. SUITE 206		
-		Address	
	DORAL, FL 33166		•
-		City/ State and Zip Code	e
ADRI	ANA@ACMMCONSULTIN	NG.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call: at (⁷⁸⁶	. 4202541
Name o	f Contact Person		de & Daytime Telephone Number
	the following amount made		
■ \$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)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle cassee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

· ·	of		
FIRST TITLE GROUP INC			
(Name o	of Corporation as current	ly filed with the Florida Dept. of	State)
P16000031721	· · · · · · · · · · · · · · · · · · ·		,
	(Document Number of	of Corporation (if known)	
B		• ,	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopt	ts the following amendment(s)
•	•		
A. If amending name, enter the new na	ime of the corporation:		
N/A			The new
name must be distinguishable and con- "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation	ed" or the abbreviation n name must contain the
• •		N/A	
B. Enter new principal office address, (Principal office address MUST BE A S			<u> </u>
	,,	-	
C. Enter new mailing address, if appli	iaahla		
(Mailing address MAY BE A POST		N/A	
			77. 79.
D. If amending the registered agent an			of the
new registered agent and/or the new		<u>s:</u>	
Name of New Registered Agent	N/A		
			<i>,</i>
	(Florida st	reet address)	···
New Registered Office Address:	N/A	, F1	orida
		(City)	(Zip Code)
Now Designated Assets Standard Standard	harring Daristanad Assay		
New Registered Agent's Signature, if c I hereby accept the appointment as regist			the position.

Signature of New Registered Agent, 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 = 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S	MARCO POSADA	7791 NW 46 ST
X Add		,	SUITE 206
Remove			DORAL, FL 33166
2) X Change	PV	ADRIANA MARQUEZ	7791 NW 46 ST
Add			SUITE 206
Remove			DORAL, FL 33166
3) Change	<u></u>		
Add			
Remove			
4) Change			
Add			-11-2-1-2-1-2-1-2-1-2-1-2-1-2-1-2-1-2-1
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
V/A	(
<u> </u>	
	·
	·
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	numeric in the contained in the amendment isen.
I/A	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment		, if other than the
date this document was signed	- 04/21/2016	
Effective date <u>if.applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendmen ere sufficient for approval.	at(s)
☐ The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following states ed for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	.,,	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	lder
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	12016 Company	
(l s	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other compointed fiduciary by that fiduciary)	en ourt
	ADRIANA MARQUEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	