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(Do	cument Number)	<u> </u>
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Paramount Title A	gency, Inc.			
	BER: P16000095702				
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	Victoria L. Pagan				
		Name of Contact Person	n		
	Paramount Title Agency, Inc.				
		Firm/ Company	····		
	2224 Ashley Oaks Circle, Suite 101				
	Address				
	Wesley Chapel, FL 33544				
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cod	e		
vna.	gan@ptitleagency.com				
· pat		sed for future annual report	notification)		
	E man address. (to be a.	sed for fature annual report			
For further information	on concerning this matter, pleas	se call:	notification)		
Victoria L. Pagan		at (<u></u> 813	591.2223 : :::		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa			
■ \$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)		
Am Div	illing Address nendment Section vision of Corporations D. Box 6327	Amend Divisio	Address Iment Section on of Corporations Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

 \mathbf{of}

raiamount rule Agency, inc.		
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P16000095702	-	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Clorida Profit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the corporation:		
		ret
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name mu	The new abbreviation st contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	-3 P
Name of New Registered Agent	<u> </u>	_ 4 33
		<u> </u>
(Florida stre	vet address)	'A ' 유' '
New Registered Office Address:	(City) Florida (Z	ip Code)
,	City 16	<i>y</i>
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the positio	n.
Signature of New R	egistered 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	\underline{v}	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	VP	SHERLEAN HUNTER	12140 Sugarloaf Key St Apt 204
Add			TAMPA, FL 33626
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u></u>
Remove			
0			
6) Change	-		
Add			
Remove			

f amending or adding additional Arti Attach <i>additional sheets, if necessary).</i>	(Be specific)
· - ·	
<u> </u>	
<u></u>	······································
	
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	<u> </u>
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(if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
\	

	option:	, if other than the
date this document was signed.		
8/1/2 Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requirements, this partment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendme Ticient for approval.	nt(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
	pted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
8/1/2017		
Dated Signature	Magan	
(By a d selecte	rector, president or other officer – if directors or officers have not be I, by an incorporator – if in the hands of a receiver, trustee, or other ced fiduciary by that fiduciary)	
	Victoria L. Pagan	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	