P1800019374

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SECRETARY OF STATE

C. GOLDEN MAY 2 3 2018

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Professional Grou	ip Title Agency, Corp			
DOCUMENT NUMBER: P18000019374				
The enclosed Articles of Amendment and fee are s	submitted for filing.			
Please return all correspondence concerning this m	atter to the following:			
Maria Lissette Ortega				
	Name of Contact Person			
Professional Group Title Ag	Professional Group Title Agency, Corp			
	Firm/ Company			
2702 SW 140 Avenue				
	Address			
Miami, Florida 33175				
	City/ State and Zip Code			
maria.ortega@411imc.com				
E-mail address: (to be u	used for future annual report notification)			
For further information concerning this matter, plea				
Maria L Ortega	at (305) 804-4085 Area Code & Daytime Telephone Number			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made	e payable to the Florida Department of State:			
■ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

Articles of Amendment to Articles of Incorporation of

FILED

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to

Professional Group Title Agency, Corp

(Name of Corporation as curren	ttly filed with the Florida Dept. of SECRETARY OF STA	
P18000019374	THE ENTROCE, I EQU	
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thinks Articles of Incorporation:	s Florida Profit Corporation adopts the following amendmen	
A. If amending name, enter the new name of the corporation:		
Professional Group Title, Corp	The	
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	8181 NW 36 Street, Unit 15	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Doral, Florida 33166	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2702 SW 140 Avenue	
	Miami, Florida 33175	
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre		
Name of New Registered Agent		
· · · · · · · · · · · · · · · · · · ·	tircet address)	
New Registered Office Address: 2702 SW 140 Avenue, M	liami 33175 . Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familian		
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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Change				
		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach additional sheets, if necessary)		
t ammending name, business address a	and mailing address also for registered agent.	
<u> </u>		
· · · · · · · · · · · · · · · · · · ·		
If an amendment provides for an exc	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	nengment it not contained in the amendment usen:	

	May 21st, 2018	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
M. Effective date <u>if applicable</u> :	ay 21st, 2018	
material date in appareasie.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amend sufficient for approval.	dment(s)
	pproved by the shareholders through voting groups. The following or each voting group entitled to vote separately on the amendments.	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and sha	
action was not required.	Topice by the metaporators without shareholder action and shareholder	
May 21st	. 2018	
selec	director, president or other officer – if directors or officers have no tell, by an incorporator – if in the hands of a receiver, trustee, or other fiduciary by that fiduciary)	
	Mr.A. / DI-4891	
	(Typed or printed name of person signing)	
	fresident.	
	(Title of person signing)	