

P97000034189

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

FILED
00 MAR -2 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. TITLE SERVICES DEPOT, INC.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☒ Pick up time _____ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy _____ ☐ Certificate of Status

RECEIVED
00 FEB 28 AM 11:27
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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*****35.00 *****35.00

G. COULLETTE MAR 02 2000

Examiner's Initials



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

February 28, 2000

LAZARUS

TALLAHASSEE, FL

SUBJECT: TITLE SERVICES DEPOT, INC.
Ref. Number: P97000034189

We have received your document for TITLE SERVICES DEPOT, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6903.

Cheryl Coulliette
Document Specialist

Letter Number: 500A00010723

RECEIVED
00 MAR -2 AM 11:19
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF
TITLE SERVICES DEPOT, INC.**

FILED
00 MAR -2 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation is
the following articles of amendment to its articles of incorporation:

- FIRST:** Amendments adopted are: That JOSEFINA PEREZ COFINO has
Resigned as Vice President, Officer and Registered Agent. (See
resignation attached). Josefina Perez Cofino has for good and valuable
consideration conveyed 500 shares to Marlene Ruiz, President of the
Corporation.
- SECOND:** Upon resignation of Josefina Perez Cofino, Marlene Ruiz was elected Vice
President and Registered Agent of the corporation.
- THIRD:** This Amendment does provide for an exchange for corporation shares
issued, whereby Josefina Perez Cofino for good and valuable
considerations conveyed 500 shares to Marlene Ruiz.
- FOURTH:** The date amendment's adoption is February 24, 2000.
- FIFTH:** The amendment was approved by the shareholders. The number of
votes cast for the amendment was sufficient for approval.

Signed this day 24th of February, 2000

Signature

MARLENE M. RUIZ, PRESIDENT

Signature

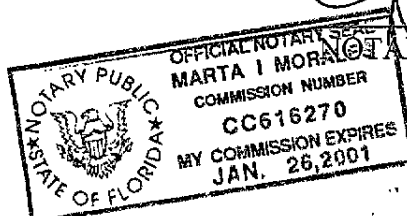
MARLENE M. RUIZ, VICE PRESIDENT/REGISTERED AGENT

NOTARY CERTIFICATE

SWORN AND SUBSCRIBED, before me on this 24 day of February, 2000. I relied
upon the following forms of identification of the above named persons: Florida Driver's
License. Marlene M. Ruiz

WITNESS my hand and official seal in the County and State last aforesaid this 24
day of February, 2000.

My Commission Expires:



CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: _____
TITLE SERVICES DEPOT, INC. _____

2. The name and address of the registered agent and office is:

Marlene M. Ruiz
(NAME)

17315 SW 8 Street
(P.O. BOX NOT ACCEPTABLE)

Pembroke Pines, Florida 33029
(CITY/STATE/ZIP)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE _____

DATE _____

2-24-2000

REGISTERED AGENT FILING FEE: \$35.00