P 99000094820

(Re	questor's Name)			
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SECRETARY OF STATE STATE OF CORPORATIONS

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COVER LETTER

TO:	Amendment Section Division of Corporat	ions				
SUBJE	ECT:	Reliance Title Se	ervices, Inc.			
		Name of Co	orporation			
DOCU	MENT NUMBER:_	P990	000094820			
The end	closed Statement of C	hange of Registered Office	/Agent and fee are submit	ted for filing.		
Please	return all corresponde	nce concerning this matter	to the following:			
		Belkis Ca	amacho			
		Name of Cor	tact Person			
		Reliance Title				
		Firm/Co	mpany			
		40555 0	N			
		12555 Orange I Addi				
		Addi	ess			
		Davie El	22220			
	Davie, FL 33330 City/State and Zip Code					
	F-mail a	reliance@to ddress: (to be used for fu	nao.com	ication)		
	E-man a	daress. (to be asea for re	iture annuar report notir	icaciony		
For fur	ther information conc	erning this matter, please c	all:			
	Belkis C	amacho	at (954)	438-8000		
	Name of Con	tact Person	at (<u>954</u>) Area Code & Daytii	me Telephone Number		
Enclose	ed is a \$35.00 check n	nade payable to the Departs	ment of State.			
		ling Address: endment Section ision of Corporations	Street Address: Amendment Se Division of Co			
		Box 6327	Clifton Buildin			
	Tall	ahassee, FL 32314	2661 Executive	e Center Circle		

Tallahassee, FL 32301

STATE LENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida	_
in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: Reliance Title Services, Inc.	
2. The principal office address: 12555 Orange Drive, Suite 215, Davie, FL 33330	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10-27-1999 Document number: P990000948	20
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Belkis Camacho	_
8908 Taft Street	JIN SEC
Pembroke Pines, FL 33024	OFF.
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	ONISION OF CORPORT
Belkis Camacho	.00
12555 Orange Drive Suite 215	
P.O. Box NOT acceptable	
Davie, FL 33330	
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	gent,
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board of the corporation has been notified in writing of the change.	
Belkis Camacho PD Printed or typed name and title	
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 relative to the proper and complete perform of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, it document is being filed merely to reflect a change in the registered office address, I hereby confirm that corporation has been hotified in writing of this change.	iance if this it the
08-12-09	
Signature of Registered Agent Date .	
If signing on behalf of an entity:	
Typed or Printed Name	

* * * FILING FEE: \$35.00 * * *