V33257

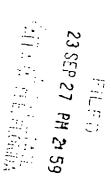
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Consumer Title &	Escrow Services Co., In	nc.
DOCUMENT NUM	V33257		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Monica Schroeder		
		Name of Contact Pe	rson
	Consumer Title & Escrow Se	ervices, Inc.	
		Firm/ Company	
	12425 28th Street N, Suite 10)7	
		Address	
	St. Petersburg, FL 33716		
		City/ State and Zip (Code
	monica@apexclose.com		
	E-mail address: (to be us	sed for future annual re	port notification)
For further informati	on concerning this matter, pleas	se call:	
Monica Schroeder		at (287-7172
Name	e of Contact Person	Area	Code & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida I	Department of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status
Ar Di P.0	ailing Address nendment Section vision of Corporations D. Box 6327 llahassee, FL 32314	An Div Th 24	eet Address lendment Section fision of Corporations e Centre of Tallahassee 15 N. Monroe Street, Suite 810 lahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



Consumer Title & Escrow Services Co., Inc.	•		1999. Co
(Name of Co	rporation as curren	tly filed with the Florida D	ept. of State)
Consumer Title & Escrow Services, Co., Inc.			**
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006 its Articles of Incorporation:	, Florida Statutes, thi	s Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new name	of the corporation:		
Consumer Title & Escrow Services, Inc.			77
name must be distinguishable and contain the v "Inc.," or Co.," or the designation "Corp, "chartered," "professional association," or the	" "Inc," or "Co".	A professional corporation	The new d' or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address, if ap	plicable:	No Change	
(Principal office address MUST BE A STRE	ET ADDRESS)		
	·		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		No Change	
D. If amending the registered agent and/or new registered agent and/or the new reg	registered office ad istered office addre	dress in Florida, enter the n	ame of the
No (Name of New Registered Agent	Change		
- And Software Regener to Figure			
	(Florida s	treet address)	
V . B	.,	,	
New Registered Office Address:		(City)	, Florida(Zip Code)
		••	,_,
New Registered Agent's Signature, if chang	ing Registered Agen	r:	
I hereby accept the appointment as registered	agent. I am familiar	with and accept the obligation	ons of the position.
	Signature of New .	Registered Agent, if changing	<u>. </u>

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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.

X Change	<u>PT</u>	John Doc	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	CEO	John R. Sherman	12425 28th Street N.
X Add			Suite 107
Remove			St. Petersburg, FL 33716
2) Change	COO	Monica Schroeder	12425 28th Street N.
X Add	-		Suite 107
Remove 3) Change	VP	Peter Lanning	St. Petersburg, FL 33716
Add			
X Remove			
4) Change		-	
Add			
Remove			
5) Change			
Add			
Remove			***************************************
6) Change			
Add			
Remove			

	additional Artic i. if necessary).	(Be specific)				
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an amendment provi	antine the amount					
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September 15, 2023	
The date of each amendment(s) adoption: date this document was signed.	if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and s action was not required.	hareholder
■ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
September 19, 2023 Dated Signature V, P,	
(By a director president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	-
Douglas M. Bales	
(Typed or printed name of person signing)	
Vice President	
(Title of person signing)	

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Consumer Title & Escrow Services Co., Inc. DOCUMENT NUMBER: V33257 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Monica Schroeder Name of Contact Person Consumer Title & Escrow Services, Inc. Firm/ Company 12425 28th Street N, Suite 107 Address St. Petersburg, FL 33716 City/ State and Zip Code monica@apexclose.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Monica Schroeder Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1. 32314 Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

335p 27 (5) py 300

Consumer '	litle & Escrow Services Co.,	Inc.		10 / 10 Co
	(Name	of Corporation as currently	filed with the Florida De	pt. of State)
Consumer '	title & Escrow Services, Co.,	Inc.		10 ₄
		(Document Number of	Corporation (if known)	
Pursuant to its Articles	the provisions of section 607 of Incorporation:	.1006, Florida Statutes, this F	Florida Profit Corporation	adopts the following amendment(s) to
A. If amen	ding name, enter the new n	ame of the corporation:		
Consumer	Title & Escrow Services, Inc.			The new
"Inc.," or	e distinguishable and contain Co.," or the designation "C "professional association,"	Torp," "Inc," or "Co". A	ompany," or "incorporated professional corporation	The new "or the abbreviation "Corp.," name must contain the word
R Entern	ar neinginal affice address	if amplitudele.	No Change	
(Principal o	ew principal office address, ffice address <u>MUST BE A S</u>	TREET ADDRESS)		
	ew mailing address, if apple address <u>MAY BE A POST</u>		No Change	
	ding the registered agent an istered agent and		ess in Florida, enter the na	me of the
Na	ne of New Registered Agent	No Change		
<u>ae</u>	HE OF HER KERMIETER TIRET			
		(Florida stree	et address)	
.,	5	(* * * * * * * * * * * * * * * * * * *		
Ne	<u> Registered Office Address:</u>		City)	_, Florida (Zip Code)
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		•		
	ered Agent's Signature, if cl			
i nereby acc	ept the appointment as regist	ered agent. I am familiar wi	th and accept the obligation	is of the position.
	=:=	Signature of New Res	gistered Agent, if changing	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check Ond)	Title	<u>Name</u>	Address
1) Change	CEO	John R. Sherman	12425 28th Street N.
X Add			Suite 107
Remove			St. Petersburg, FL 33716
2) Change	coo	Monica Schroeder	12425 28th Street N.
X Add			Suite 107
Remove 3) Change	VP	Peter Lanning	St. Petersburg, FL 33716
Add X Romove			
4) Change Add			
Remove 5) Change			
Add			
Remove			
Add Remove			

	itional sheets, if necessary). (Be specific)
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	September 15, 2023	if other than the
The date of each date this documen	amendment(s) adoption:	
Effective date if	applicable: (no more than 90 days after amendment file date)	
Note: If the date document's effect	e inserted in this block does not meet the applicable statutory filing requirements, tive date on the Department of State's records.	, this date will not be listed as the
Adoption of Am	endment(s) (CHECK ONE)	
☐ The amendme	int(s) was/were adopted by the incorporators, or board of directors without sharehold required.	lder action and shareholder
The amendme	ent(s) was/were adopted by the shareholders. The number of votes cast for the ame olders was/were sufficient for approval.	endment(s)
☐ The amendme	ent(s) was/were approved by the shareholders through voting groups. The following rately provided for each voting group entitled to vote separately on the amendment	g statement t(s):
"The nu	imber of votes east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	September 19, 2023	
	Signature Deulin Mil DC V. P.	
	(By a director president or other officer – if directors or officers have r selected, by an incorporator – if in the hands of a receiver, trustee, or o appointed fiduciary by that fiduciary)	not been other court
	Douglas M. Bales	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	