I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears
above, or on an attachment with all other like empowered.

I

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# P23000019834

Entity Name: TRUEWAY TITLE & ESCROW AGENCY INC.

#### **Current Principal Place of Business:**

828 W LANTANA BOULEVARD LANTANA, FL 33462

### **Current Mailing Address:**

828 W LANTANA BOULEVARD LANTANA, FL 33462 US

### FEI Number: 92-2243039

#### Name and Address of Current Registered Agent:

DAGOSTINO, GABRIELLE 828 W LANTANA ROAD LANTANA, FL 33462 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:	ABRIELLE DAGOSTINO		05/02/2025		
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	PRESIDENT	Title	VP		
Name	DAGOSTINO, GABRIELLE	Name	LAMAZARES, JOSE A		
Address	828 W LANTANA BOULEVARD	Address	828 W LANTANA RD		
City-State-Zip:	LANTANA FL 33462	City-State-Zip:	LANTANA FL 33462		

### SIGNATURE: GABRIELLE DAGOSTINO

05/02/2025 Date

## FILED May 02, 2025 Secretary of State 9477838756CC

Certificate of Status Desired: No

PRESIDENT