### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000106787

Entity Name: GREYCROFT TITLE AGENCY, LLC

# **Current Principal Place of Business:**

111 NATURE WALK PARKWAY SUITE 107 AT. AUGUSTINE, FL 32092

# **Current Mailing Address:**

111 NATURE WALK PARKWAY SUITE 107 AT. AUGUSTINE, FL 32092 US

# FEI Number: 82-1549905

### Name and Address of Current Registered Agent:

DEAN, AMANDA V 111 NATURE WALK PARKWAY SUITE 107 ST. AUGUSTINE, FL 32092 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:

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	DEAN, AMANDA V	Name	DEAN, CHAD A
Address	111 NATURE WALK PARKWAY, SUITE 107	Address	111 NATURE WALK PARKWAY, SUITE 107
City-State-Zip:	ST. AUGUSTINE FL 32092	City-State-Zip:	ST. AUGUSTINE FL 32092

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: AMANDA V. DEAN

MANAGER

04/29/2019

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date