

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000400198

Entity Name: MPA TITLE SERVICES, LLC**Current Principal Place of Business:**2300 LAKEVIEW PARKWAY
SUITE 756
ALPHARETTA, GA 30009**Current Mailing Address:**2300 LAKEVIEW PARKWAY
SUITE 756
ALPHARETTA, GA 30009 US**FEI Number:** 87-3646399**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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

Date

Authorized Person(s) Detail :

Title	MANAGER
Name	SETHNA, SHAUN B
Address	2300 LAKEVIEW PARKWAY SUITE 756
City-State-Zip:	ALPHARETTA GA 30009
Title	OFFICER
Name	BUTCHER-THOMAS, ANDREA A.
Address	2300 LAKEVIEW PARKWAY SUITE 756
City-State-Zip:	ALPHARETTA GA 30009
Title	ASST. SECRETARY
Name	SZUPELLO, TERESA L.
Address	2300 LAKEVIEW PARKWAY SUITE 756
City-State-Zip:	ALPHARETTA GA 30009

Title	MANAGER
Name	LOADHOLT, JAHNISA T.
Address	2300 LAKEVIEW PARKWAY SUITE 756
City-State-Zip:	ALPHARETTA GA 30009
Title	OFFICER
Name	HERSHEY, DREW
Address	2300 LAKEVIEW PARKWAY SUITE 756
City-State-Zip:	ALPHARETTA GA 30009

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: TERESA L. SZUPELLO**ASSISANT SECRETARY****04/19/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date