

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000000517

Entity Name: GENUINE TITLE, LLC

Current Principal Place of Business:

11155 DOLIFLED BLVD., #100
OWINGS MILLS, MD 21117

Current Mailing Address:

11155 DOLIFLED BLVD., #100
OWINGS MILLS, MD 21117

FEI Number: 20-2954273

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MGR
Name ZUKERBERG, JAY
Address 11155 DOLIFLED BLVD., #100
City-State-Zip: OWINGS MILLS MD 21117

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: JAY ZUKERBERG

PRES

01/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date