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DIVISION OF CORPORATIONS  
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Florida Department of State  
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**FOREIGN PROFIT/NONPROFIT CORPORATION**

**CHARTER LAND TITLE AGENCY, INC.**

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**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

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**1. CHARTER LAND TITLE AGENCY, INC.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

**2. NEW YORK**

(State or country under the law of which it is incorporated)

**3. 11 3478514**

(FEI number, if applicable)

**4. 3/11/99**

(Date of incorporation)

**5. PERPETUAL**

(Duration. Year corp. will cease to exist or "perpetual")

**6. UPON FILING THIS APPLICATION**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 110 WALT WHITMAN RD., STE. 203, S. HUNTINGTON, NY 11746**

(Principal office address)

**110 WALT SHITMAN RD., STE. 203, S. HUNTINGTON, NY 11746**

(Current mailing address)

**8. TITLE INSURANCE AGENCY AND REAL ESTATE SETTLEMENT**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

**9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)**

Name: Incorporating Services, Ltd.

Office Address: 1540 Glenway Drive

Tallahassee

(City)

Florida 32301

(Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Bruce O. Porter, ASST. SEC.  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: NEAL T. IORIO  
Address: 110 WALT WHITMAN RD., SUITE 203  
S. HUNTINGTON, NY 11746

Vice Chairman: JOSEPH MINCONE  
Address: 110 WALT WHITMAN RD., SUITE 202  
S. HUNTINGTON, NY 11746

Director: JOHN V. MINCONE  
Address: 110 WALT WHITMAN RD., SUITE 202

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

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B. OFFICERS

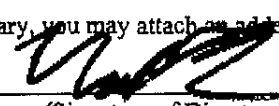
President: NEAL T. IORIO  
Address: 110 WALT WHITMAN RD., SUITE 203  
S. HUNTINGTON, NY 11746

Vice President: JOSPEH MINCONE  
Address: 110 WALT WHITMAN RD., SUITE 202  
S. HUNTINGTON, NY 11746

Secretary: JOHN V. MINCONE  
Address: 110 WALT WHITMAN RD., STE. 202, S. HUNTINGTON, NY 11746

Treasurer: \_\_\_\_\_  
Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. NEAL IORIO, PRESIDENT  
(Typed or printed name and capacity of person signing application)

**State of New York  
Department of State } ss:**

*I hereby certify, that the Certificate of Incorporation of CHARTER LAND TITLE AGENCY, INC. was filed on 03/11/1999, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.*

*The Biennial Statement is past due.*



\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 14th day of April  
two thousand and six.*

Daniel Shapiro  
Special Deputy Secretary of State

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