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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: PREMIE	R TITLE & TRUST, INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original	nal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee	\$78.75 Filing Fee	\$87.50 Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM: IVE	TTE AMARO Name	e (Printed or typed)	
151	I ALEGRIANO		
		Address	
COF	RAL GABLES FL 33146		
	City,	State & Zip	,
305-	310-4788		
	Daytime T	elephone number	
Don(suncoastmiamihomes.com		
	E-mail address: (to be use	d for future annual report i	notification)

NOTE: Please provide the original and one copy of the articles.

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	The state of the s
ARTICLE I NAME	A Million William That
The name of the corporation shall be:	10 FEB 22 PM 1:19
Premier title + Trust, Inc.	SEGRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is:	
17071 W. Dikie Hwy. N. Miani	Beach, Fr 33160
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Document Services	
ARTICLE IV SHARES The number of shares of stock is:	
The name and Florida street address (P.O. Box NOT acceptable) of the Head Amaro	1d Baldaccin. (V. Pres/Sec) W. Dikie Hwy iami Blach, Fz 33160 e registered agent is:
M. Miam Beach, F 33160	
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
Vette Amaro 1707, W. Dixie Hwy N. Miani Beach, FL 33160	
Having been named as registered agent to accept service of process j	**************************************
place designated in this certificate, I am familiar with and accept the agree to act in this capacity	-
Somme	_ 2/18/10
Signature/Registered Agent/Vette Amaro Incorporator	Date
Signature/Incorporator	Date