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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6381

RECEIVED JAN 19 2011

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
24-hr title services inc

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$78.75 |

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 JAN 19 AM 9:29

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Handwritten signature/initials

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COVER LETTER

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

SUBJECT: 24-HOUR TITLE SERVICES INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

\$78.75 Filing Fee & Certified Copy
 \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED

FROM: ACCOUNTING & FINANCIAL PLANNING INC-JORGE A LOPEZ
Name (Printed or typed)

16181 SW 78 STREET
Address

MIAMI FL 33193
City, State & Zip

305-388-8406
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

11 JAN 19 AM 9:29

ARTICLE I NAME 24-HOUR TITLE SERVICES INC
The name of the corporation shall be:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE
Principal street address
107 NW 133 TERRACE STE 51-302
PLANTATION FL 33325

Mailing address, if different is:
107 NW 133 TERRACE STE 51-302
PLANTATION FL 33325

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
TO ENGAGE IN ANY LAWFUL ACTIVITY PERMITTED BY
THE LAWS OF THIS STATE.

ARTICLE IV SHARES
The number of shares of stock is: 100 SHARES WITH A PAR VALUE OF \$1.00 PER SHARE.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: RIGOBERTO F VALDES-DIRECTOR Name and Title: _____
Address: 107 NW 133 TERRACE STE 51-302 Address: _____
PLANTATION FL 33325

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


Name: RIGOBERTO F VALDES
Address: 107 NW 133 TERRACE STE 51-302
PLANTATION FL 33325

ARTICLE VII INCORPORATOR


The name and address of the incorporator is:

Name: RIGOBERTO F VALDES
Address: 107 NW 133 TERRACE STE 51-302
PLANTATION FL 33325

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

X  _____ 01/19/11
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

X  _____ 01/19/11
Required Signature/Incorporator Date

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