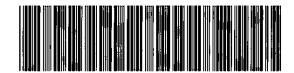
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(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP	MAIT	MAIL			
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(Do	ocument Number)				
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



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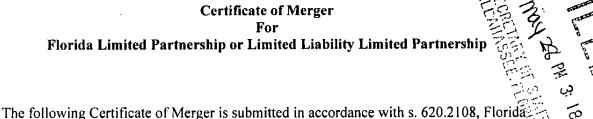
S. HAWKES
JUN 2 - 2009
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	ECT:Stewart	Title C	Compa	any	
5050	Name of S		<u> </u>		
The e	nclosed Certificate of Merger and fee	(s) are sı	ubmitte	d for filing.	
Please	e return all correspondence concerning	g this ma	atter to:		
	Nacole Klootwyk			_	
	Contact Person				
	Stewart Title Company			_	
	Firm/Company				
	18501 Murdock Circle Suite	403		_	
	Address				
	Port Charlotte, FL 33948	}		_	
	City, State and Zip Code				
	nacole.klootwyk@stewart.c	om		_	
E	-mail address: (to be used for future annual re	eport notif	fication)		
For fu	orther information concerning this man	tter, plea	se call:		
	Nacole Klootwyk	at (941)	255-0377
	(Name of Contact Person)	_ (,	Area Cod	e and Daytim	e Telephone Number)
Ce	ertified copy (optional) \$52.50				
STRE	EET ADDRESS:		MAIL	ING ADD	RESS:
Regist	tration Section			ration Secti	
	on of Corporations			on of Corpo	rations
	n Building			30x 6327	
	Executive Center Circle		Tallah	assee, FL 3	32314

Florida Limited Partnership or Limited Liability Limited Partnership

Statutes.



FIRST: The exact name, form/entity type, and jurisdiction for each merging party are as **Jurisdiction** Form/Entity Type Name Stewart Acquire Land Title, LLLP Florida Limited Liability Limited Partnership SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows: Name Jurisdiction Form/Entity Type Stewart Title Company Corporation Texas THIRD: The date the merger is effective under the governing laws of the surviving party is: June 1, 2009 (NOTE: If survivor is a Florida limited partnership or limited liability limited partnership, effective date cannot be prior to nor more than 90 days after the date this

document is filed by the Florida Department of State. If survivor is not a Florida limited partnership or limited liability limited partnership, effective date shall be as provided in survivor's governing statute.)

FOURTH: The merger was approved by each party as required by its governing law.

<u>FIFTH:</u> If the surviving party is a foreign organization not qualified to transact business in this state, the street address and mailing address of an office which the Florida Department of State may use for the purposes of s. 620.2109(2), F.S., are as follows:

Street address:	N/A	
Mailing address:	M/A	

SIXTH: Other provisions, if any, relating to the merger:

N/A



SEVENTH: Signature(s) for Each Party:

(Merger must be signed by all general partners of Florida limited partnerships or limited liability limited partnerships and by the authorized representative of each other party.)

Name of Entity/Organization: Stewart Title Company	Signature(s):	Name of Individual:
Stewart Acquire Land Title, LLLP	& Min Bayin	JAllen Bengman Chref Financial Officer J. Allen Bengman Chief Financial Officer Stapart Title Company Sole General Partner of Stewart Aguire Land Title, LLLP
Certified Copy: \$52.50	Per Party (Optional) (Optional)	OS MAY Z8 MI 3: I'M