

A12 000000224

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400230071604

04/20/12--01039--014 **1000.00

FILED
2012 APR 20 AM 10 58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. CLINE

APR 23 2012

EXAMINER

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32314

SUBJECT: The Title Insurance Team, LLLP

The enclosed Certificate of Limited Partnership, Statement of Qualification and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:


Tara M. Warrington, Esq.
Kaufman, Englett & Lynd, PLLC
111 N. Magnolia Avenue, Suite 1500
Orlando, Florida 32801

For further information concerning this matter, please call Tara M. Warrington, Esq. at (407) 513-1900 extension 7207.

Enclosed is a check for the following amount: \$1,025.00 for Registration filing fees.

FILED
2012 APR 20 AM 10:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF LIMITED PARTNERSHIP


1. Name of Partnership: The Title Insurance Team, LLLP
2. Street Address of initial designated office: 111 N. Magnolia Avenue, Suite 1600, Orlando, Florida 32801
3. Registered Agent for Service of Process: Paul M. Pantozzi 
4. Florida street address for Registered Agent for Service of Process: 111 N. Magnolia Avenue, Suite 1600, Orlando, Florida 32801

5. 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.



Signature of Registered Agent

6. The Partnership elects to be a limited liability limited partnership.
7. The Names and business addresses of each general partner are:

Paul M. Pantozzi  111 N. Magnolia Ave., Suite 1600, Orlando, FL 32801

8. Effective upon filing.

Signed this 11 day of April, 2012.



Paul M. Pantozzi 
General Partner

2012 APR 20 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**STATEMENT OF QUALIFICATION FOR FLORIDA
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the partnership as identified in the records of the Florida Department of State:

The Title Insurance Team, LLLP

Completed Certificate of Limited Partnership and associated filing fee are attached hereto.

2. Suffix adopted for the above named partnership: "LLLP."

3. The street address of its chief executive office: same as current record address.

4. The street address of principal office in Florida: same.

5. The name and Florida street address of the partnership's agent for service of process:

111 N. Magnolia Avenue, Suite 1500
Orlando, Florida 32801

6. This partnership hereby elects to be a limited liability partnership.

7. Effective upon filing.

The execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signed this 11 day of April, 2012.



Paul M. Pantozzi
General Partner

FILED
2012 APR 20 AM 10 50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA