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TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: McKeen Abstracting, Inc.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following: 500003483765--3

-12/01/00--01093--002  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Jeffrey M. Jacobs

(Name of Person)

Jeffrey M. Jacobs, CPA

(Firm/Company)

One San Jose Place Suite 25

(Address)

Jacksonville, FL 32257

(City/State and Zip code)

For further information concerning this matter, please call:

Jeffrey M. Jacobs, CPA

(Name of Person)

at ( 904 ) 260-0483

(Area Code & Daytime Telephone Number)

FILED  
00 DEC - 1 PM 9:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

STREET ADDRESS:

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

mta  
12/6

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**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.*

1. McKeen Abstracting, Inc.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Pennsylvania 3. 25-1756591  
(State or country under the law of which it is incorporated) (FBI number, if applicable)
4. 07-01-95 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 01/11/2000  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 11609 Sedgemoore Drive North; Jacksonville, FL 32223  
(Principal office address)
- P.O. Box 57181; Jacksonville, FL 32241  
(Current mailing address)
8. Title search & abstracting  
(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 or Mail Drop Box **NOT** acceptable)
- Name: Charles Scott McKeen
- Office Address: 11609 Sedgemoore Drive North
- Jacksonville, Florida 32223  
(City) (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.*

  
(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.

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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Charles Scott McKeen

Address: 11609 Sedgemoore Drive North  
Jacksonville, FL 32223

Vice Chairman: \_\_\_\_\_

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

Director: Cynthia B. McKeen

Address: 11609 Sedgemoore Drive North  
Jacksonville, FL 32223

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

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

B. OFFICERS

President: Charles Scott McKeen

Address: 11609 Sedgemoore Drive North  
Jacksonville, FL 32223

Vice President: Cynthia B. McKeen

Address: 11609 Sedgemoore Drive North  
Jacksonville, FL 32223

Secretary: Cynthia B. McKeen

Address: 11609 Sedgemoore Drive North; Jacksonville, FL 32223

Treasurer: Cynthia B. McKeen

Address: 11609 Sedgemoore Drive North; Jacksonville, FL 32223

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

13. Charles Scott McKeen  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Charles Scott McKeen  
(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

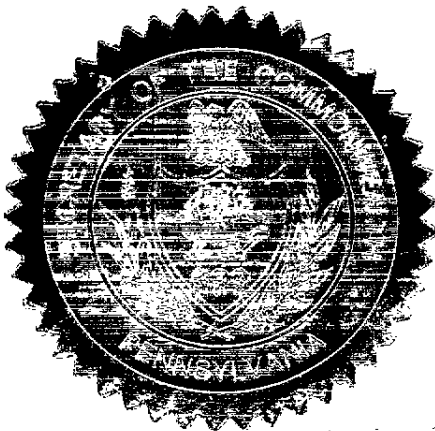
NOVEMBER 07, 2000

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

MCKEEN ABSTRACTING, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania  
and remains a subsisting corporation so far as the records of this office  
show, as of the date herein.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and caused  
the Seal of the Secretary's  
Office to be affixed, the day  
and year above written.

*Kim Duggan*

Secretary of the Commonwealth

DPOS

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00 DEC -1 PM 9:03  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE