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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Lateside title and Escrer Agence, 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:				
Brit Chapman				
(Name of Person)				
Lakeside Title and Escrow Agency, Inc.				
(Firm/Company)				
124 W. Prospect Ave # 150 Cleveland OH 4415				
(Address)				
Cleveland OH 4415				
(City/State and Zip code)				
For further information concerning this matter, please call:				
Britt Chapman at 216, 771-1272				
(Name of Person) (Area Code & Daytime Telephone Number) N				
STREET ADDRESS: MAILING ADDRESS: W				
STREET ADDRESS: Registration Section MAILING ADDRESS:				
Division of Corporations Division of Corporations				
409 E. Gaines St. P.O. Box 6327 Tallahassee, FL 32399 Tallahassee, FL 32314				
Enclosed is a check for the following amount:				
□ \$70.00 Filing Fee \$\square\$\$\\$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee,				
□ \$70.00 Filing Fee \$\begin{array}{c} \$78.75 Filing Fee & □ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy				

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.
1. Latesive 79the and Escrow Agency, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. (State or country under the law of which it is incorporated) (FEI number, if applicable)
1 April 53 1999 5 Perpetual.
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
1. 7580 Sandlate 11.17 #52 Orlando, 81 3281
(Principal office address)
(Current mailing address)
TH T - dal a
8. // Le Source Double & Country to be carried out in state of Florida)
As 7
0 04 0
Name: Still Chapman 1200 C 11 L ON#Ch
Office Address: 7380 Sandlate ND #5D
Orignoo, Florida 32819
(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.
WILL
(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.
- 12. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	<u> </u>
Director:	
Address:	
B. OFFICERS	
President: Demis O'Brien	
Address: 8439 Riversive Dr F	Davel 04 4306
Vice President:	TALE
Address:	20 -
	7.88 7.88
Secretary:	्रिश व 👸
Address:	12: 12: 13 13: 14: 15: 15: 15: 15: 15: 15: 15: 15: 15: 15
Treasurer:	DM &
Address:	_
NOTE: If necessary, you may attach an addendum to the application listing additional add	tional officers and/or directors.
13.	
(Signature of Director or Officer listed in number 12 of the	application) -
(Typed or printed name and capacity of person signing ap	oplication)

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show LAKESIDE TITLE AND ESCROW AGENCY, INC., an Ohio Corporation, Charter No. 1071683, having its principal location in Cleveland, County of Cuyahoga, was incorporated on April 16, 1999, and is currently in GOOD STANDING upon the records of this office.





Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 3rd day of August, A.D. 2005.

Ohio Secretary of State

Validation Number: 200521402658