F06000001900

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	sin es s Entity Nam	e)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



400068301174

03/24/06--01019--001 **70.00





326 West Main Street
Suite 208
Milford, CT 06460
toll free: 877.TTTLE.75
phone: 203.878.0872
fax: 203.878.3651
www.hartfordtitle.com

Via Express Mail

March 3, 2006

Secretary of State

Enclosed please find the application of Hartford National Title, Inc. to transact business in your state.

If you have any questions or require any further information, please contact:

Scott Penner Hartford National Title, Inc. 326 West Main Street, Suite 208 Milford, CT 06460

Phone: 203-878-0872 Fax: 203-878-3651

Thank you for your assistance.

Very Truly Yours

Scott T. Penner

TRANSMITTAL LETTER

TO:	Registration Se Division of Co								
SUBJ	ECT: Hartford	National Title, In	c.						
		(Nan	ne of corpo	ratio	n - must include suffix)				
Dear S	ir or Madam:								
"Certif	closed "Applica icate of Existenc t business in Flo	e", and check are	Corporation submitted	for A	Authorization to Transacegister the above referen	et Busir iced for	ness in Flor eign corpo	ida", ration t	o
Please	return all corresp	ondence concern	ning this ma	atter	to the following:				
Scott F	Penner								
			(Nam	e of	Person)			90	_
Hartfor	d National Title,	Inc.					A.		* 4
		37.30	(Firm	/Cor	mpany)		52	<u>[-2</u>	T.L.O.
326 W	est Main Street,	Suite 208					j-	÷	
			(/	Addro	ess)		<u></u>	CO.	()
Milford,	CT, 06460						Ð.	=	
			(City/St	ate a	nd Zip code)			*	_
For fur	ther information	concerning this	natter, plea	ise ca	all:				
Scott Pe	enner		at (203) 878-0872				
	(Name of Person	on)		rea C	code & Daytime Telepho	one Nui	nber)		
Registra Divisio 409 E.	ET ADDRESS: ation Section n of Corporation Gaines St. ssee, FL 32399	ıs			MAILING ADDRESS Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	ns			
Enclose	ed is a check for	the following am	ount:						
Ø \$70.	00 Filing Fee	S78.75 Filir Certificate		0	\$78.75 Filing Fee & Certified Copy	C	7.50 Filing ertificate o ertified Co	f Statu	s &

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. Hartford National Title, Inc. (Enter name of corporation; must include "INCORPORATE	FD." "COMPANY." "CORPORATION."
"Inc.," "Co.," "Corp.," "Inc.," "Co," or "Corp.")	ED, COMMINT, COR ORITION,
(If name unavailable in Florida, enter alternate corporate na	me adopted for the purpose of transacting business in Florida)
2. Connecticut	3. 202310704
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. 02/08/05	5. Perpetual
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification	
	not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.13	501, 607.1502 and 817.155, F.S.)
7. 326 West Main Street, Milford, CT, 06460	
(Principal office a	address)
326 West Main Street, Milford, CT, 06460	A TABLES
(Current mailing a	address)
8. Closing, Escrow, and Settlement Services as well as is	couing Title Incurance
(Purpose(s) of corporation authorized in home state of	
9. Name and street address of Florida registered agen	it: (P.O. Box or Mail Drop Box NOT acceptable)
Name: NRAI Services, Inc.	
Office Address: 2731 Executive Park Drive, Suite 4	
Office Address.	
Weston	, Florida <u>33331</u> (Zip code)
(City)	(Zip code)
10. Registered agent's acceptance:	
	ervice of process for the above stated corporation at the place intment as registered agent and agree to act in this capacity.
	niment as registered agent and agree to act in this capacity. Es relative to the proper and complete performance of my dut
and I am familiar with and accept the obligations of my	
NRAI Services, Inc.	
11	Lisa Reeves, Assistant Secretary

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.

(Registered agent's signature)

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

A. DIRECTORS Chairman: _ Address: _ Vice Chairman: ___ Address: Director: Scott Penner Address: 326 West Main Street, Suite 208, Milford, CT, 06460 Director: John Walsh Address: 326 West Main Street, Suite 208, Milford, CT, 06460 **B. OFFICERS** President: Scott Penner Address: Same As Above Vice President: Address: Secretary: Address: ___ Treasurer: John Walsh Address: Same As Above NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) Resident (Typed or printed name and capacity of person signing application)

INSTRUCTIONS

Optional: If the document is incorrect where can you be reached for corrections?

Note: Complete and submit the application in duplicate. This application must be accompanied by a certificate of existence (or goodstanding), dated within 90 days from the date of filing with the Idaho Secretary of State's Office. A certified copy of the articles of incorporation will NOT be accepted.

- 1. Lines 1 & 2 Enter the name of the corporation exactly as it reads from the certificate of existence from the domestic state. Complete item 2 only if: (1) the corporation must adopt a fictitious name to avoid a conflict with an existing name on the records of the Secretary of State, or (2) the corporation's true name does not include one of the words of incorporation required by section 30-1-401, Idaho Code, and such word is added to the true name in item 2. A corporate name must include corporation, incorporated, company, limited, or any abbreviation thereof. If a fictitious name is adopted to avoid a conflict, attach a resolution of the board of directors adopting the assumed name.
- 2. Lines 3 & 4 Enter the domestic state and its date of incorporation. You must include the day, month and year. This date must match the date on the certificate of existence, if one is given.
- 3. Line 5 Enter the address of its principal office.
- 4. Line 6 Enter the address you would like future reports mailed to, if different from the address in #5.
- 5. Line 7 Enter the name and <u>street address</u> of the registered agent for the corporation. A registered agent is the person designated to receive service of process upon litigation. This person <u>must</u> be located in Idaho at a street address. If you do not have anyone to act as your registered agent in Idaho you may contact the Secretary of State for a list of companies which offer such representation in Idaho.
- Line 8 Enter the names and business addresses of the officers and directors. We are looking for office held of president, secretary and directors.
- 7. Sign and date the application. The application must be signed by the Chairman of the Board, the President of the corporation or another of its officers or a director. Please identify the name of the signer by typing his/her name below the signature and indicate in what capacity they are signing. The signer must be a director or an officer of the corporation.
- 8. Enclose the appropriate fee.
 - a. If the application is typed, the fee is \$100.
 - b. If the application is not typed, the fee is \$120.
 - If expedited service is requested, add \$20 to the fee.
 - d. If the fees are to be paid from the filing party's pre-paid customer account, enter the customer account number in the indicated space.

Pursuant to Idaho Code § 67-910(6), the Secretary of State's Office may delete a business entity filing from our database if payment for the filing is not completed.

9. Mail or deliver to:

Office of the Secretary of State
700 West Jefferson, Basement West
PO Box 83720

Boise, ID 83720-0080

10. If you have questions or need help, call the Secretary of State's Office at (208) 334-2301.

ADMISSION OF FOREIGN CORPORATION

Section 30-1-1501

30-1-1501. AUTHORITY TO TRANSACT BUSINESS REQUIRED.

- (1) A foreign corporation may not transact business in this state until it obtains a certificate of authority from the secretary of state.
- (2) The following activities, among others, do not constitute transacting business within the meaning of subsection (1) of this section:
 - (a) Maintaining, defending or settling any proceeding;
 - (b) Holding meetings of the board of directors or shareholders or carrying on other activities concerning internal corporate affairs;
 - (c) Maintaining bank accounts;
 - (d) Maintaining offices or agencies for the transfer, exchange and registration of the corporation's own securities or maintaining trustees or depositaries with respect to those securities;
 - (e) Selling through independent contractors;
 - (f) Soliciting or obtaining orders, whether by mail or through employees or agents or otherwise, if the orders require acceptance outside this state before they become contracts;
 - (g) Creating or acquiring indebtedness, mortgages and security interests in real or personal property;
 - (h) Securing or collecting debts or enforcing mortgages and security interests in property securing the debts:
 - (i) Owning, without more, real or personal property;
 - (j) Conducting an isolated transaction that is completed within thirty (30) days and that is not one in the course of repeated transactions of a like nature;
 - (k) Transacting business in interstate commerce.
- (3) The list of activities in subsection (2) of this section is not exhaustive.

INSTRUCTIONS

Optional: If the document is incorrect where can you be reached for corrections?

Note: Complete and submit the application in duplicate. This application must be accompanied by a certificate of existence (or goodstanding), dated within 90 days from the date of filing with the Idaho Secretary of State's Office. A certified copy of the articles of incorporation will NOT be accepted.

- 1. Lines 1 & 2 Enter the name of the corporation exactly as it reads from the certificate of existence from the domestic state. Complete item 2 only if: (1) the corporation must adopt a fictitious name to avoid a conflict with an existing name on the records of the Secretary of State, or (2) the corporation's true name does not include one of the words of incorporation required by section 30-1-401, Idaho Code, and such word is added to the true name in item 2. A corporate name must include corporation, incorporated, company, limited, or any abbreviation thereof. If a fictitious name is adopted to avoid a conflict, attach a resolution of the board of directors adopting the assumed name.
- 2. Lines 3 & 4 Enter the domestic state and its date of incorporation. You must include the day, month and year. This date must match the date on the certificate of existence, if one is given.
- 3. Line 5 Enter the address of its principal office.
- 4. Line 6 Enter the address you would like future reports mailed to, if different from the address in #5.
- 5. Line 7 Enter the name and <u>street address</u> of the registered agent for the corporation. A registered agent is the person designated to receive service of process upon litigation. This person <u>must</u> be located in Idaho at a street address. If you do not have anyone to act as your registered agent in Idaho you may contact the Secretary of State for a list of companies which offer such representation in Idaho.
- Line 8 Enter the names and business addresses of the officers and directors. We are looking for office held of president, secretary and directors.
- 7. Sign and date the application. The application must be signed by the Chairman of the Board, the President of the corporation or another of its officers or a director. Please identify the name of the signer by typing his/her name below the signature and indicate in what capacity they are signing. The signer must be a director or an officer of the corporation.
- 8. Enclose the appropriate fee.
 - a. If the application is typed, the fee is \$100.
 - b. If the application is not typed, the fee is \$120.
 - c. If expedited service is requested, add \$20 to the fee.
 - d. If the fees are to be paid from the filing party's pre-paid customer account, enter the customer account number in the indicated space.

Pursuant to Idaho Code § 67-910(6), the Secretary of State's Office may delete a business entity filing from our database if payment for the filing is not completed.

9. Mail or deliver to:

Office of the Secretary of State 700 West Jefferson, Basement West PO Box 83720 Boise, ID 83720-0080

10. If you have questions or need help, call the Secretary of State's Office at (208) 334-2301.

ADMISSION OF FOREIGN CORPORATION

Section 30-1-1501

30-1-1501, AUTHORITY TO TRANSACT BUSINESS REQUIRED.

- (1) A foreign corporation may not transact business in this state until it obtains a certificate of authority from the secretary of state.
- (2) The following activities, among others, do not constitute transacting business within the meaning of subsection (1) of this section:
 - (a) Maintaining, defending or settling any proceeding;
 - (b) Holding meetings of the board of directors or shareholders or carrying on other activities concerning internal corporate affairs;
 - (c) Maintaining bank accounts;
 - (d) Maintaining offices or agencies for the transfer, exchange and registration of the corporation's own securities or maintaining trustees or depositaries with respect to those securities;
 - (e) Selling through independent contractors;
 - (f) Soliciting or obtaining orders, whether by mail or through employees or agents or otherwise, if the orders require acceptance outside this state before they become contracts;
 - (g) Creating or acquiring indebtedness, mortgages and security interests in real or personal property;
 - (h) Securing or collecting debts or enforcing mortgages and security interests in property securing the debts;
 - (i) Owning, without more, real or personal property;
 - (j) Conducting an isolated transaction that is completed within thirty (30) days and that is not one in the course of repeated transactions of a like nature;
 - (k) Transacting business in interstate commerce.
- (3) The list of activities in subsection (2) of this section is not exhaustive.

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Hartford National Title, Inc.	
(Name of o	orporation - must include suffix)
Dear Sir or Madam:	
	ation for Authorization to Transact Business in Florida", nitted to register the above referenced foreign corporation to
Please return all correspondence concerning to	nis matter to the following:
Scott Penner	
	(Name of Person)
Hartford National Title, Inc.	
	(Firm/Company)
326 West Main Street, Suite 208	
	(Address)
Milford, CT, 06460	
(C	ity/State and Zip code)
For further information concerning this matter	r, please call:
Scott Penner at (203) 878-0872
(Name of Person)	(Area Code & Daytime Telephone Number)
CONDECT ADDRESS	MAN INC ADDRESS.
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
409 E. Gaines St. Tallahassee, FL 32399	P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount	
☑ \$70.00 Filing Fee ☐ \$78.75 Filing Fee Certificate of St	

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.	Hartford National Title, Inc.			
	(Enter name of corporation; must include "INCORPORATE "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"		
	(If name unavailable in Florida, enter alternate corporate na	me adopted for the purpose of transacting busin	ness in Florida)	
2	Connecticut	3. 202310704		
	(State or country under the law of which it is incorporated)	(FEI number, if applicable))	
4.	02/08/05	5. Perpetual		
••	(Date of incorporation)	(Duration: Year corp. will cease to exist of	or "perpetual")	
6.	Upon Qualification			
	(Date first transacted business in Florida. If corporation has		qualification.")	
		501, 607.1502 and 817.155, F.S.)	Z: 0	
7.	326 West Main Street, Milford, CT, 06460		<u></u>	
	(Principal office a	address)	影影	- ± g
	326 West Main Street, Milford, CT, 06460			(#1:50
	(Current mailing a	address)		F 5 5
				Grander 1
8.	Closing, Escrow, and Settlement Services as well as is	ssuing Title Insurance.	<u> 원</u> . 양	
	(Purpose(s) of corporation authorized in home state or	r country to be carried out in state of Florida)	7	
9.	Name and street address of Florida registered agen	t: (P.O. Box or Mail Drop Box NOT acce	ptable)	
•			. ,	
	Name: NRAI Services, Inc.	 _		
0	ffice Address: 2731 Executive Park Drive, Suite 4			
	Weston	Elouido 33331		
	(City)	, Florida <u>33331</u> (Zip code)		
	` •	• • • • • • • • • • • • • • • • • • • •		
H. de fu	 Registered agent's acceptance: aving been named as registered agent and to accept se signated in this application, I hereby accept the appoin the agree to comply with the provisions of all statute and I am familiar with and accept the obligations of my 	ntment as registered agent and agree to ac es relative to the proper and complete perfo	ct in this capac	ity. I
	NRAI Services, Inc.	sa Reeves, Assistant Secretary		
	By: Long Registered agent's signatu	Assist Sec 3/23/06 (re)		

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: Scott Penner Address: 326 West Main Street, Suite 208, Milford, CT, 06460 Director: John Walsh Address: 326 West Main Street, Suite 208, Milford, CT, 06460 28 121 **B. OFFICERS** President: Scott Penner Address: Same As Above Vice President: Address: _ Secretary: ___ Address: __ Treasurer: John Walsh Address: Same As Above NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)

61-66 Rev 2/94

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that

HARTFORD NATIONAL TITLE, INC.

incorporated under the laws of Connecticut is in existence.

Secretary of the State

Date Issued: March 13, 2006