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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificate:	s of Status		
Special Instructions to Filing Officer:				
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## **COVER LETTER**

<b>TO:</b> New Filing Section Division of Corporations	
SUBJECT: Golden Eagle Title and Escre	ow, Inc.
Name of corporation - mi	ıst include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Auth "Certificate of Existence," or "Certificate of Good Standing above referenced foreign corporation to transact business in	" and check are submitted to register the
Please return all correspondence concerning this matter to the	e following:
Dennis L. O'Brien	
Name of Person	on
Golden Eagle Title and Escrow, Inc.	
Firm/Company	
6200 Oak Tree Blvd., Suite 260	
Address	
Independence, Ohio 44131	
City/State and Z	p code
dobrien@lakesidetitleandescrow.com	
E-mail address: (to be used for fu	ture annual report notification)
For further information concerning this matter, please call:	
William J. Barrett at (440 ) 7	73-9765
Name of Person Area Code	& Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
	.75 Filing Fee & S87.50 Filing Fee, tified Copy 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.

(Enter name of co	Title and Escrow Inc. orporation; must include "INCORPORATED, orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"
	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
2. Ohio		26-1152837
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
4. <u>1/7/08</u>	5.	perpetual
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6		
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)
7. 6200 Oak T	ree Blvd., Suite 260, Independ	· · · · · · · · · · · · · · · · · · ·
	(Principal office add	ress)
	(Current mailing add	ress)
8. Title and es	scrow	1 SECTION SECT
(Purpose(s)	of corporation authorized in home state or co	untry to be carried out in state of Florida)
9. Name and stree	t address of Florida registered agent: (P.O	P. Box NOT acceptable)
Name:	Dennis L. O'Brien	
Office Address:	510 Douglas Avenue, Suite 104	ountry to be carried out in state of Florida)  No. Box NOT acceptable)  PH 1: 21
	Altamonte Springs	
	(City)	, Florida 32714 (Zip code)
designated in this further agree to co	ed as registered agent and to accept service application, I hereby accept the appointm	ce of process for the above stated corporation at the place nent as registered agent and agree to act in this capacity. I elative to the proper and complete performance of my duties, sition as registered agent.

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: Vice Chairman: Address: Director: Address: Director: Address: **B. OFFICERS** President: Dennis L. O'Brien Address: 6200 Oak Tree Blvd., Suite 260 Independence, Ohio 44131 Vice President: Address: \_ Secretary: \_ Treasurer: William J. Barrett Address: 6200 Oak Tree Blvd., Suite 260, Independence, Ohio 44131 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 14. William J. Barrett, Treasurer

## United States of America State of Ohio Office of the Secretary of State

I, Jon Husted, 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 business entities; that said records show GOLDEN EAGLE TITLE & ESCROW INC., an Ohio corporation, Charter No. 1749449, having its principal location in Westlake, County of Cuyahoga, was incorporated on January 07, 2008 and is currently in GOOD STANDING upon the records of this office.

SECRETARY OF STATE DIVISION OF CORPORATION



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 19th day of October, A.D. 2011

Ohio Secretary of State

Validation Number: V201129201A91F