

Division of Corporations Secretary of State P.O. Box 6327 Tallahassee, Florida 32314

~**800002628508**--2 -08/31/98--01056--010 ---****131,25 *****131,25

Enclosed please find:

•"Application by Foreign Corp. for Authorization to Transact Business in Florida"

•Original "Certificate of License" signed and sealed by South Carolina Dept. of Insurance. (Domicile State) (This is their form of Certificate of Status)

Atlantic Title Insurance Company is requesting Certificate of Status for Florida.

•Check enclosed for \$131.25:

\$70.00 Registration Fee

\$ 8.75 for Certificate of Status

\$52.50 for Certified copy.

Total check

\$131.25

Please mail to:

One West Cary Street Richmond, Va. 23220

Thank you, and if any questions please call me @ (804) 649-1161

Sincerely,

S. Rene' Gant

98 NOV 16, PM 1: 30

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

August 31, 1998

S. RENE GANT ATLANTIC TITLE INSURANCE COMPANY ONE WEST CARY ST. RICHMOND, VA 23220

SUBJECT: ATLANTIC TITLE INSURANCE COMPANY Ref. Number: W98000019912

We have received your document for ATLANTIC TITLE INSURANCE COMPANY and your check(s) totaling \$131.25. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

The second page of the application, which designates officers and directors and contains a signature, is missing. Please find a blank page enclosed for your convenience. Please complete and return.

You have submitted a certificate from the Department of Insurance. The certificate that we require is issued by the Secretary of State's office.

A certificate of existence, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6095.

Jennifer Sindt Document Examiner

Letter Number: 298A00044846

Atlantic Title Insurance Company of Florida

October 9, 1998

Jennifer Sindt

Letter#298A00044846

Document Examiner

Florida Department of State

Re:

Atlantic Title Insurance Company

Ref#W98000019912

Dear Ms. Sindt,

Enclosed, please find Resolution of Board of Directors, adopting an alternate name for use in the State of Florida, as "Atlantic Title Insurance Company of Florida". Also attached Names & Addresses of Officers & Directors Page. As requested, enclosed you will also find Certificate of Existence for Atlantic Title Insurance Company from the domicilary State of South Carolina.

If you have any further questions, please do not hesitate to call me at (804) 649-1161. We await the letter of acknowledgement, Certificate of Status, from Florida so they we may proceed in submitting into the State of Florida.

Sincerely

S. Rene' Gant

98 NOV 16 PM 1: 30

SECRETARY OF STATE
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 12, 1998

S. RENE GANT ATLANTIC TITLE INSURANCE COMPANY ONE WEST CARY ST. RICHMOND, VA 23220

SUBJECT: ATLANTIC TITLE INSURANCE COMPANY

Ref. Number: W98000019912

We have received your resolution form, the second page of the application, and a certificate of existence; however, the name that you have adopted in the resolution, "ATLANTIC TITLE INSURANCE COMPANY OF FLORIDA", is also not available for use in Florida. Simply adding "Florida" or "of Florida" to the name does not make it distinguishable from the corporation already on record. Please adopt another name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6095.

Jennifer Sindt Document Examiner

Letter Number: 698A00050506

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ATLANTIC TITLE INSURANCE COMPANY OF SOUTH CAROLINA

November 13, 1998

Jennifer Sindt Document Examiner Secretary of State of Florida 409 East Gaines Street Tallahassee, FL 32399

Letter#698A00050506

Re:

Atlantic Title Insurance Company Ref#W98000019912

Dear Ms. Sindt,

Enclosed please find new Resolution of Board of Directors filled out adopting an alternate name for use in the State of Florida as "Atlantic Title Insurance Company of South Carolina". Please proceed with letter of acknowledgement and Certificate of Status, from Florida so that we may proceed in submitting into the State of Florida.

Any further questions, please call me at (804) 649-1161.

Sincerely,

S. Rene' Gant

One West Cam St. Richmond Va. 23220

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned TODD GORELICK (Name)	, do hereby	certify	
that this Resolution of the Board of Directors of ATLANTIC TITLE			
INSURANCE COMPANY (Corporate Name)			
a corporation duly organized and existing under the laws of the State of South Co			
	19	94.	
Be it resolved, thatATLANTIC TITLE INSURANCE COMPANY (Corporate Name)			
organized and existing in the State of SOUTH CAROLINA, hereby		ł	
ATLANTIC TITLE INSUPANCE COMPANY OF SOUTH CAROUN	for use in	Florida.	·
Dated: 9/10/98			OIVISION :
Signature of either Chairman, Vice Chairman or any officer		o PM 1:31	FILED TARY OF STAT CORPORATI
TODD A. GONELICAL Type or print name			ONS.

INHS19(4/96)

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 COMPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

4	ATLANTIC TITLE INSU		IV Y						
1. (Ŋ	lame of corporation: must in	Clude the word	<u>אמרטאמי</u>	DATEN	* *CON40**				_
3	Name of corporation: must in bbreviations of like import in r parmership if not so contain	language as wil	I clearly ind	licate th	atitis a co	NY", CORP	ORATION Stead of:	a natura	ds or
		#1 010 HSHIG	at present	.)		•			. be:2011
2.	SOUTH CAROLINA		•	_					
(S	SOUTH CAROLINA sets or country under the law	of which it is in	corporated	3	57-05	-75396 er, if applic			_ *
4.	June 18, 1974 (Date of Incorporation)	Ė			Downski	1	anie)		
	(Date of Incorporation)	ŧ	(Dun	ation: Y	ear com. w	ual ill cease to	avine a F		
6	`N/A				00. p , t.	un ecese M	ANSCOL	berbem:	217
(D	ats first transacted business	in Florida. (See s	octions 607.1	501, 607.	502, and 817	1155 Ces	•		
7	P.O. Box 8627					11-11-12-13			
	Columbia, SC 29202						· · ·	· 	1 AON 86
	(Cu	rrent malling ac	dress)				-		6
	To incume well .							~	_
8.	to insure and reinsur	e titles to	real n	ronert	τ ύ				3
	To insure and reinsur (Purpose(s) of corporation at	uthorized in hon	ne state or o	country	to be carri	ed out in the	e state of	Florida)	PH 1:31
	Name and street address	utionized in hon ess of Florid	ne state or o	red ac	p pe carri	ed out in th	e state of	Florida)	PH 1:31
	Name and street address	uthorized in hon	a registe	red ac	p pe carri	ed out in th	e state of	Florida)	PH 1:31
	Name and street address	ss of Florid	a registe	county red ac	to be carri	- -		Florida) 9-030	- 1000
	Name and street address	uthorized in honess of Florid Insurar Capitol	a registe	county red ac	to be carri	ed out in the		9-030	- 1000
9.	Name and street address: Office Address: Registered agent's ac	uthorized in honess of Florid Insurar Capitol Tallaha	a registe ce Com ssee	county red aq missi	b be carri	- Florida ,	3239 (Zip (9-030 Code)	O
9. 9. david corpo	Name and street address	Insurar Capitol Tallaha ceptance: Stered agent is signated in this control	a registe a registe ace Com L assee and to achis application	country ered ac	ervice of	Florida ,	3239 {Zip (9-030 Code)	0 stated
9. lavii corpo egis of ali	Name and street address: Name: Office Address: Registered agent's acres to be an armed as registered agent and agree to statutes relative to the and accept the obligation.	Insurar Capitol Tallaha ceptance: Stered agent is signated in the proper and consorting the proper and consoft my possible agent in the proper agent i	a registe a registe ace Com Lassee and to achis applicate pacity. complete pition as re	country red ac missi cept s cation, further perform egister issio	ervice of I hereby Per agree to The agent.	Florida ,	3239 {Zip (9-030 Code)	0 stated
9. 9. david corpo	Name and street address: Name: Office Address: Registered agent's acres to be an armed as registered agent and agree to statutes relative to the and accept the obligation.	Insurar Capitol Tallaha ceptance: Stered agent as signated in the proper and consorting positions of my positions.	a registe a registe ace Com Lassee and to achis applicate pacity. complete pition as re	country red ac missi cept s cation, further perform egister issio	ervice of I hereby Per agree to The agent.	Florida ,	3239 {Zip (9-030 Code)	0 stated

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 addresses of officers and/or directors:

A. DIRECTORS

Chairman: WILLIAM GORELICK
Address: 4425 RANDOLPH RD., SUITE ZOY
CHARWITE, NC Z8Z11
Vice Chairman:
Address:
Director: TOBA A. GORELICK
Address: 4425 RANDOLPH RD., SUITE 204
CHARLOTTE, NC Z8211
Director: P. KING HOLHES
Address: 1301 PICKENS STREET 98 SI
COWMBIA, SC 29201
B. OFFICERS
President: P. KING HOLMES
Address: 1301 PICKENS STREET = So
COLUMBA, SC 29201 W TA
Vice President PATRICIA Q. PARIS
Address: 1301 PICKENS STREET
COZUMBIA, SC 29201
Secretary: _ Tobb A. GORELICK
Address: 4425 RANDOLIH RD., SUITE ZOY
CHARLOTTE, NC 28211
Treasurer: WILLIAM GORELICK
Address: 4425 RANDOLPH RD., SUITE 204
CHARLOTTE, NC 28211
NOTE: If necessary, you may attach an addendum to the application listing additional officers
and/or directors. * Addendum attached w/
13. <u>rado le Hore de</u> additional officer.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Tobb A. Gorelick (Typed or printed name and capacity of person signing application)



Addendum to Name Application (Names of Officers & Directors) Florida Department of State

Applicant:

Atlantic Title Insurance Company of Florida

Reference:

W98000019912

Item 12:

Additional Officer:

Vice President:

John R. Wooldridge, Jr. 4425 Randolph Road, Suite 204 Charlotte, NC 28211

The State of South Carolina



Office of Secretary of State Jim Miles Certificate of Existence

I, Jim Miles, Secretary of State of South Carolina Hereby certify that:

ATLANTIC TITLE INSURANCE COMPANY,

a corporation duly organized under the laws of the State of South Carolina on June 18th, 1974, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to Section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 28th day of September, 1998.

Jim Miles, Secretary of State

Note: This certificate does not contain any representation concerning fees or taxes owed by the Corporation to the South Carolina Tax Commission or whether the Corporation has filled the annual report with the Tax Commission. If it is important to know whether the Corporation has paid all taxes due to the State of South Carolina, and has filled the annual reports, a certificate of compliance must be obtained from the Tax Commission.