

PO2000122980

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

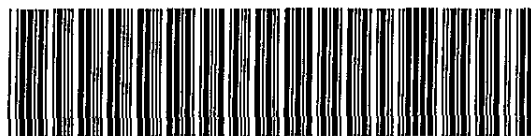
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2002 NOV 14 AM 10:00
STATE
TALLAHASSEE FLORIDA

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2002 NOV 14 AM 10:00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: A & N TITLE, INC.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

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

ADDITIONAL COPY REQUIRED

FROM: LOVELLE AUGUSTINE
Name (Printed or typed)

1591 CHIPPEWA TRAIL
Address

MAITLAND, FL 32751
City, State & Zip

(407) 644-0178
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

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2002 NOV 14 AM 10:00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: A. & N. TITLE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: PMB # 407
145 S. ORLANDO AVENUE, STE. 8
MAITLAND, FL 32751

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TITLE AGENT

ARTICLE IV SHARES

The number of shares of stock is: 300

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

LOVELLE AUGUSTINE	BRENDA POZO	G. DOUGLAS NAIL
1591 CHIPPEWA TRAIL	679 LAKE HARBOR CIRCLE	1413 HARBIN DRIVE
MAITLAND, FL 32751	EDGEWOOD, FL 32809	KISSIMMEE, FL 34744
PRESIDENT	VICE PRESIDENT/SECRETARY	TREASURER

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

LOVELLE AUGUSTINE
1591 CHIPPEWA TRAIL
MAITLAND, FL 32751

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LOVELLE AUGUSTINE
1591 CHIPPEWA TRAIL
MAITLAND, FL 32751

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

LOVELLE AUGUSTINE, President
Signature/Registered Agent

11/11/02
Date

LOVELLE AUGUSTINE, President
Signature/Incorporator

11/11/02
Date