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(Requestor's Name)	
(Address)	
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PICK-UP WAIT MAIL	
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03 JUL -7 PH 3: 04

SECRETALY, SECRETARY, SECRET

TRANSMITTAL LETTER

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

(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 □ \$78.75 \$87.50 Filing Fee Filing Fee Filing Fee Filing Fee, & Certificate of Status & Certified Copy Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED Name (Printed or typed) Address

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

Daytime Telephone number

ZARTICI ES OF INCORRORATION	
ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	FILED
ARTICLE I NAME	
The name of the corporation shall be:	03 JUL -7 PH 3: 04
A + TITIE SERVICE, CORP.	SECRETARY OF STATE TALLAHASSEE FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	a K
4315NW 7 SP #46 pri ani, F1 33 126.	·
•	-
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
TITLE AGENCY.	
(((E) () () () ()	
ARTICLE IV SHARES	
The number of shares of stock is:	-
(00%)	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS	. <u>=</u>
List name(s), address(es) and specific title(s):	-
Ocha H. Duarte	
7291SW 13 Terroco=	
Maeri F1 33144	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address of the registered agent is:	
alia M. Duarte.	0172144
Salsm 13 Jeno de Mioni	1,1100117
ARTICLE VII INCORPORATOR	
The name and address of the Incorporator is:	
ordia M. Duarte.	
4315N W757 AUG	
**************************************	*******
Having been named as registered agent to accept service of process for the above stated corpora	ation at the place designated in this
certificate, I am familial with and accept the appointment as registered agent and agree to act in to	his capacity
	0/30/03
Signature/Registered Agent	Date
	laclas
Signature/Incorporator	J7801,072
Signature/Incorporator	\ Date

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