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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 SLWRIGHT COMPANY, 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 **□** \$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 FROM: SUSAN L. WRIGHT Name (Printed or typed) 9485 Regency Square Blvd. #330 Address Jacksonville, FL 32225 City, State & Zip

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

Daytime Telephone number

904-855-4100

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: SLWRIGHT COMPANY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 9485 REGENCY SQUARE BLVD. #330, JACKSONVILLE, FL 32225

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TITLE INSURANCE OR ANY OTHER LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): SUSAN L. WRIGHT, 9485 REGENCY SQUARE BLVD. #330, JACKSONVILLE, FL 32225

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is: SUSAN L. WRIGHT, 9485 REGENCY SQUARE BLVD. #330, JACKSONVILLE, FL 32225

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

SUSAN L. WRIGHT, 9485 Regency Square Blvd. #330, Jacksonville, FL 32225

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

Signature/Registered Agent Susaw W

SUSAN WRIGHT

Date

Signature/Incorporator 543

SUSAN WRIGHT

Date