4000/10362 Florida Department of State **Division of Corporations**

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To: Division of Con Fax Number From: Account Name	: (850)205-0381 : EMPIRE CORPORATE	KIT COMPANY, F	FILED 04 JUL 27 PH
Account Number Phone Fax Number	: (305)634-3694 : (305)633-9696	LORIDA	2: 15

FLORIDA PROFIT CORPORATION OR P.A.





OF

EA TITLE INSURANCE, INC.

The undersigned incorporator(s), for the purpose of forming a Profit Corporation under Chapter 607 of the Florida Statutes, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I

The name of this corporation shall be: EA TITLE INSURANCE, INC.

ARTICLE II

This corporation shall commence existence upon the date of filing with the Division of Corporations, state of Florida, and shall have perpetual existence.

ARTICLE III

The principal place of business of this corporation: 1075 SUNSET STRIP, SUITE 208, SUNRISE, FL 33313.

ARTICLE IV

The general nature of business of this corporation is to transact any and all lawful business.

ARTICLE V

The aggregate number of shares which this corporation shall have authority to issue is 1,000 shares common stock having an individual par value of \$ 1.00.

Unless otherwise stated in these articles, or in an amendment to these articles, there shall be only one (1) class of stock of this corporation



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ARTICLE VI

The name and street address of the initial Registered Agent of this corporation shall be: PHILBERT HILLIMAN, 6289 W. SUNRISE BLVD., SUITE 250, SUNRISE, FL 33313.

ARTICLE VII

The name and address of the officers and board of directors shall be:

PRESIDENT

EDGAR ALLEN

1075 SUNSET STRIP, SUITE 208 SUNRISE, FL 33313

ARTICLE VIII

The name and address of the incorporator(s) to these Articles of incorporation shall be:

EMPIRE CORPORATE KIT OF AMERICA, INC. 2444 NW 7TH PLACE MIAMI, FL 33127

The undersigned has executed these Articles of Incorporation this 26^{TH} day of <u>JULY. 2004</u>.

INCORPORATOR Ray Stormont Signing for Empire Corporate Kit of America, Inc.

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TOTAL P. 64

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

EA TITLE INSURANCE, Inc. (Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT

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