

704000134561

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

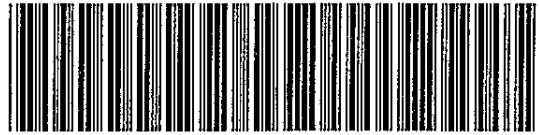
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200041347382

09/27/04--01031--003 **78.75

04 SEP 27 PM 12:51

TRANSMITTAL LETTER

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

SUBJECT: MDCM Title Services, 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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: MARY MAGDALENO
Name (Printed or typed)

2655 S. Le Jeune Rd #900
Address

CONAL GABLES, FL 33134
City, State & Zip

305-271-0056
Daytime Telephone number

04 SEP 27 PM 12:51

SEP 27 1990
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

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

ARTICLES OF INCORPORATION OF MDCM TITLE SERVICES, INC.

The undersigned subscriber to these Articles of Incorporation, a natural person competent to contract, hereby forms a corporation under the laws of the State of Florida.

ARTICLE I - NAME

The name of the corporation shall be: MDCM Title Services, Inc.

ARTICLE II - NATURE OF BUSINESS

This corporation may engage in or transact any and all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, county, territory or nation. Specifically real estate title insurance services.

ARTICLE III - CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 100 shares of common stock having a par value of \$1.00 per share.

ARTICLE IV – DIRECTORS / OFFICERS

The names, address and titles of the Directors/Officers:

MARY MAGDALENO	President
----------------	-----------

ARTICLE V – REGISTERED AGENT

The street address of the initial registered office of the corporation shall be:

2655 S. Le Jeune Road
Suite 906
Coral Gables, FL 33134

and the name of the initial Registered Agent for the corporation at that address is:

MARY MAGDALENO

04 SEP 27 PM 12:51
SECRET
ENVIRONMENTAL
STATE
RECORDS

04 SEP 27 PM 12:51

ARTICLE VII INCORPORATOR

MARY MAGDALENO
2655 S. Le Jeune Road
Suite 906
Coral Gables, FL 33134

IN WITNESS WHEREOF, the undersigned has hereunto set his hand and seal on this 24th day of September, 2004.

Registered Agent:

MARY MAGDALENO

State of Florida)
) ss.
County of Miami-Dade)

The foregoing instrument was acknowledged by me this 24th day of September, 2004 by: MARY MAGDALENO who is/are personally known by me or who has/have produced: _____ as identification and who did not take an oath.

Notary Public
State of Florida
My Commission Expires:

