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- (Requestor's Name)				
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(Document Number)				
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# TRANSMITTAL LETTER

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

SUBJECT:	Titla Exparts	i Irc.	
	(PROPOSED CORPORA	TTE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	a check for:
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	11140 N.W.	(Printed or typed)  Address	
	Pembroke 1-	, ,	3026
	754 -54 Daytime	7-3147 Telephone number	<del></del>

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



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 4, 2004

ANNET GONZALEZ 11140 N.W. 17 CT PEMBROKE PINES, FL 33026

SUBJECT: TITLE EXPERTS, INC. Ref. Number: W04000036444

We have received your document for TITLE EXPERTS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Ingram Document Specialist New Filings Section

Letter Number: 304A00057507

#### ARTICLES OF INCORPORATION

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

FILED

#### <u> ARTICLE I NAME</u>

The name of the corporation shall be:

National Title and Escrow, Inc.

\_\_ 04 NOV - 1 PM 5: 16

TALL AHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 11140 NW 17 Court
Pembroke Pines, FL 33026

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Title Company

#### ARTICLE IV SHARES

The number of shares of stock is:

Annet Gonzalez 100 shares at no par value

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Annet Gonzalez President 11140 N.W. 17 Court Pembroke Pines, FL 33026 Enoemia Gonzalez Secretary 11140 N.W. 17 Court Pembroke Pines, FL 33026

#### ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Annet Gonzalez 11140 NW 17 Court Pembroke Pines, FL 33026

#### ARTICLE VII INCORPORATOR

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

Annet Gonzalez 11140 NW 17 Court Pembroke Pines, FL 33026

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

10/27/04/ Date

7/04

Date