

P050000 20745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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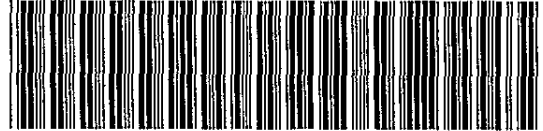
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Title Solutions of Naps Corp
(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: Nancy Prior
Name (Printed or typed)

2335 Stanford Ct #501
Address

Naples FL 34112
City, State & Zip

239-774-2333
Daytime Telephone number

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

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:

TITLE SOLUTIONS OF NAPLES CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2335 Stanford Ct.
Suite 501
Naples, Fl. 34112

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To act as a title insurance agency.

ARTICLE IV SHARES

The number of shares of stock is 100.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

President: Nancy Prior
1150 Martinique Ct.
Marco Island, Fl. 34145

Vice-President: Lisa D'Angelo
1738 Dogwood Dr.
Marco Island, Fl. 34145

Secretary: Nancy Prior
1150 Martinique Ct.
Marco Island, Fl. 34145

Treasurer: Lisa D'Angelo
1738 Dogwood Dr.
Marco Island, Fl. 34145

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ARTICLE VI: REGISTERED AGENT

The name and Florida street address of the registered agent is:

Nancy Prior
1150 Martinique Ct.
Marco Island, Fl. 34145

ARTICLE VII: INCORPORATOR

The name and address of the incorporator is:

Nancy Prior
1150 Martinique Ct.
Marco Island, Fl 34145

Having been named as registered agent to accept service of process for the above stated corporation at the place designed in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.




Signature/ Registered Agency



Date



Signature/ Incorporator



Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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