



**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Alexander Title Services, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000031871

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donna Hearne, Esq.  
(Name of Person)

Law Office of Donna Hearne, P.A.  
(Name of Firm/Company)

2632 Hollywood Blvd., Suite 305  
(Address)

Hollywood, FL 33020  
(City/State and Zip Code)

For further information concerning this matter, please call:

Donna Hearne (Name of Person) at ( 954 ) 962-0350  
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35.00 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy
- \$52.50 Filing Fee, Certificate of Status & Certified Copy

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**ARTICLES OF CORRECTION**

for

Alexander Title Services, Inc.

Name of Corporation as currently filed with the Florida Dept. of State

**FILED**

05 MAR 17 PM 4:07

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

P05000031871

Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These Articles of Correction correct P05000031871 (Document Type)

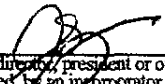
filed with the Department of State on February 28, 2005 (File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Incorrect Name: Alexander Title Services, Inc.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Correct the inaccuracy, incorrect statement, or defect:

Correct Name: Alexander Professional Title, Inc.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

  
\_\_\_\_\_  
(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Jocelyne LaBossiere  
(Typed or printed name of person signing)

President   
(Title of person signing)

**Filing Fee: \$35.00**