# Po 5080128422

| (Re                                     | questor's Name)  |             |
|---|------------------|-------------|
| (Ad                                     | dress)           |             |
| (Adi                                    | dress)           |             |
| (Cit                                    | y/State/Zip/Phon | e #)        |
| PICK-UP                                 | MAIT             | MAIL.       |
| (Business Entity Name)                  |                  |             |
| (Document Number)                       |                  |             |
| Certified Copies                        | _ Certificates   | s of Status |
| Special Instructions to Filing Officer: |                  |             |
|   |                  |             |
|   |                  |             |
|   |                  |             |
|   |                  |             |

Office Use Only



200059710052

09/19/05--01016--002 \*\*/0.00

SECRETARY OF STATE
TALLAHASSEE, FLORID

FILED

9,9,05

# **COVER LETTER**

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

| SUBJECT: Accurate Closings, INC.                       |                                     |   |  |  |
|--|-------------------------------------|---|--|--|
| (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)        |                                     |   |  |  |
|  |                                     |   |  |  |
|  |                                     |   |  |  |
| Enclosed are an original and one (1) copy of the artic | cles of incorporation and           | a check for:  |  |  |
| ▼ \$70.00  | \$78.75 Filing Fee & Certified Copy | \$87.50 Filing Fee, Certified Copy & Certificate of |  |  |
|  | ADDITIONAL CO                       | Status<br>PPY REQUIRED                              |  |  |
|  |                                     |   |  |  |
| FROM: Sarah Whiteley                                   | _                                   |   |  |  |
| Name (Printed or typed)                                |                                     |   |  |  |
| 3167 Chamblee Lane                                     | Address                             |   |  |  |
| Clearwater, Florida 337                                | 59<br>State & Zip                   |   |  |  |
| 727-385-7876  Daytime To                               | elephone 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:

Accurate Closings, INC.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3167 Chamblee Lane Clearwater, Florida 33759

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**Professional Corporation** 

### ARTICLE IV SHARES

The number of shares of stock is: 1000 Common stock at \$1 par value

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sarah Whiteley- President 3167 Chamblee Lane Clearwater, Florida 33759

### ARTICLE VI REGISTERED AGENT

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

Sarah Whiteley 3167 Chamblee Lane Clearwater, Florida 33759

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sarah Whiteley 3167 Chamblee Lane Clearwater, Florida 33759

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 9/15/05
Signature/Incorporator 9/15/05
Date

SECRETARY OF STATE