

P05000144276

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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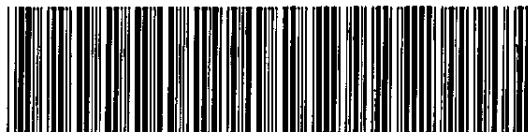
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05 OCT 24 AM 8:34  
TALLAHASSEE, FLORIDA

11/25/05

## COVER LETTER

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

SUBJECT: Amiga Title & Escrow, 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: Patricia S. Harmon

Name (Printed or typed)

PO Box 6043

Address

Titusville, FL 32782

City, State & Zip

321-258-1159

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:

Amiga Title & Escrow, Inc.

05 OCT 24 AM 8:42

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

PO Box 6043  
Titusville, FL 32782

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

All business allowed under the laws of the State of Florida and the Government of the United States of America

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Patricia S. Harmon, President

PO Box 6043  
Titusville, FL 32782

Michele Sarver, Vice President  
4488 Heaton Park Trail, Viera, FL 32955

**ARTICLE VI REGISTERED AGENT**

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

Patricia S. Harmon  
451 Marina Road, E-173  
Titusville, FL 32796

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Patricia S. Harmon  
PO Box 6043  
Titusville, FL 32782

\*\*\*\*\*  
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

Patricia S. Harmon  
Signature/Registered Agent

Patricia S. Harmon  
Signature/Incorporator

10/21/05  
Date

10/21/05  
Date