

PO6000017627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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06 Jan 20 PM 2:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2/1/06  
1/24/06  
SAX

**COVER LETTER**

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

SUBJECT: Cm Title Service 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: Tammy Morales  
Name (Printed or typed)  
525 S. Conway Rd #71  
Address  
ORlando, Fla. 32807  
City, State & Zip  
407-929-4366  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 26, 2006

TAMMY MORALES  
525 S CONWAY RD #71  
ORLANDO, FL 32807

SUBJECT: CM TITLE SERVICE INC.  
Ref. Number: W06000003944

We have received your document for CM TITLE SERVICE INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 245-6955.

Suzanne Hawkes  
Document Specialist  
New Filing Section

Letter Number: 806A00005629

**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:

CM Title Service INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

525 S. Conway Rd #71  
ORI, 71. 32807

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Business

**ARTICLE IV SHARES**

The number of shares of stock is:

1

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

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

Tammy Morales - Owner-Agent

**ARTICLE VI REGISTERED AGENT**

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

525 S. Conway Rd #71  
ORI, 71. 32807

Tammy Morales

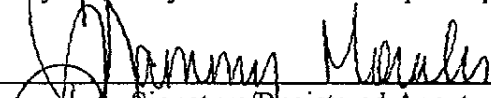
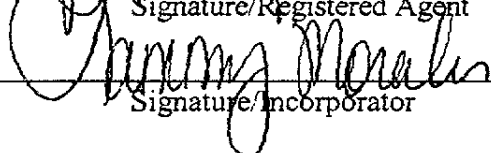
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Tammy Morales  
525 S. Conway Rd #71 ORI 7132807

\*\*\*\*\*

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  
  
\_\_\_\_\_  
Signature/Incorporator

1/15/06  
\_\_\_\_\_  
Date  
2/6/06  
\_\_\_\_\_  
Date

FILED  
06 Jan 20 PM 2:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA