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COVER LETTER

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

SUBJECT: GA Title Services, Inc.	TO NAME AND AND VALOR	KINE CHIEDAN		
Enclosed are an original and one (1) copy of the artic				
\$78.75 Filing Fee Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
FROM: Alfredo Aleman				
Name ((Printed or typed)			
10700 N. Kendall Drive, Suite 400				
Miami, FL 33176	State & Zip			
305-630-3898	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:

GA Title Services Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

10700 N. Kendall Drive, Suite 400 Miami, FL 33176

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Title Agency

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):

Alfredo Aleman Director

10700 N. Kendall Drive

Suite 400

Miami, FL 33176

ARTICLE VI REGISTERED AGENT

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

Alfredo Aleman 10700 N. Kendall Drive Suite 400 Miami, FL 33176

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Alfredo Aleman 10700 N. Kendall Drive Suite 400 Miami, FL 33176

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

Date

1/2/06

Signature/Incorporator

Date