# P0600008246/

(Re	questor's Name)			
(Address)				
(Ad	dress)	<u>, , , , , , , , , , , , , , , , , , , </u>		
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ · Certificates	of Status		
Special Instructions to Filing Officer.				
,				
1,406	25 285	<del>,</del>		

Office Use Only





900075747689

06/05/06--01029--004 \*\*70.00

FILED

06 JUN 16 AM 10: 17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

# **COVER LETTER**

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

SUBJECT: CHAMPION	TITLE SERVICI	ES, INC.	_
————(P)	ROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an original and or	ne (1) copy of the arti	cles of incorporation and	l a check for:
\$70.00 \$78. Filing Fee Filing I		\$78.75 Filing Fee	\$87.50 Filing Fee,
& Cert	ificate of Status	& Certified Copy	Certified Copy & Certificate of Status
		ADDITIONAL CO	
FROM: Ruth Cabe	lla		
	Name	(Printed or typed)	
4350 Du	ihme Road	A 11	
	4	Address	
Madeira	Beach, Florida 33	2708	
- Madeila		State & Zip	
	•	•	
(727)398	3-2774		
<del></del>	Daytime T	elenhone number	

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



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 6, 2006

RUTH CABELLA 4350 DUHME ROAD MADEIRA BEACH, FL 33708

SUBJECT: RUTH CABELLA Ref. Number: W06000025885

We have received your document for RUTH CABELLA. However, the document has not been filed and is being returned for the following:

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6934.

Loria Poole Document Specialist New Filing Section

Letter Number: 406A00039091

Hyan have any guestions please Call me RUTH CABELLA (727) 398-2774 a (800) 866-6032

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

# 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:

CHAMPION TITLE, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

9021 Oakhurst Road, Suite E, Seminole, Florida 33776

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business

#### ARTICLE IV SHARES

The number of shares of stock is:

500

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Ruth Cabella, Director, President, Vice President, Secretary, Treasurer

#### ARTICLE VI REGISTERED AGENT

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

RUTH CABELLA

4350 DUHME ROAD

MADEIRA BEACH, FLORIDA 33708

# ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Ruth Cabella

4350 Duhme Road

Madeira Beach, Florida 33708

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 Agen

Signature/Incorporator

6/2/00

Date

Daie