

P06000089085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

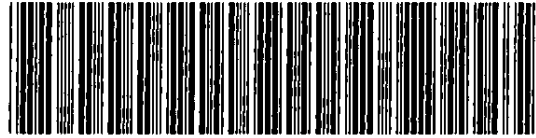
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: SMART Title And Settlement Services, 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: Cindy Carrion
Name (Printed or typed)

3020 NE 9 Terr
Address

Pompano Beach, FL 33064
City, State & Zip

954 309-7373
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:

SMART Title And Settlement Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3020 NE 9 TERR., Pompano Beach, FL 33064

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Real Estate Settlement Services

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):

CINDY CARRION, 3020 NE 9 TERR, Pompano Beach, FL 33064 (President)
ROBERT SARRO, 3020 NE 9 TERR, Pompano Beach, FL 33064 (Secretary)

ARTICLE VI REGISTERED AGENT

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

CINDY CARRION, 3020 NE 9 TERR, Pompano Beach, FL 33064

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CINDY CARRION, 3020 NE 9 TERR, Pompano Beach, FL 33064

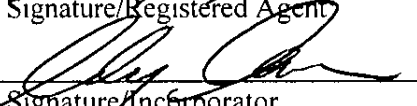
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

6/26/06

Date



Signature/Incorporator

6/26/06

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA