

PO6000/00854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

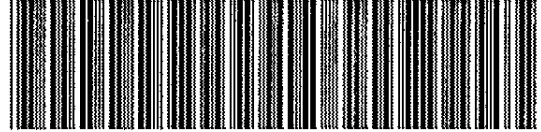
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: Affiliated Lien Searches, 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: Pamela Gibbs
Name (Printed or typed)

2030 SE Dransow Cir
Address

PT ST Lucie, FL 34952
City, State & Zip

772-260-9687
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:

Affiliated Lien Searches, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2030 SE Dranson Cir
Port St. Lucie, FL 34952

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any & All Lawful Business

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):

Pamela L. Gibbs President & VP
2030 SE Dranson Cir - Port St. Lucie, FL 34952

Eric J. Gibbs Sec./Treas.
2030 SE Dranson Cir - Port St. Lucie, FL 34952

ARTICLE VI REGISTERED AGENT

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

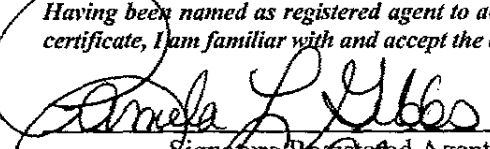
Pamela L. Gibbs
2030 SE Dranson Cir
Port St. Lucie, FL 34952

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Pamela L. Gibbs
2030 SE Dranson Cir
Port St. Lucie, FL 34952

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

Pamela Gibbs

7/31/06
Date

7/31/06
Date

06 AUG -2 AM 8:33
FILED
SECRETARY OF STATE
ALLAHACOFF, FLORIDA