

P07.000127169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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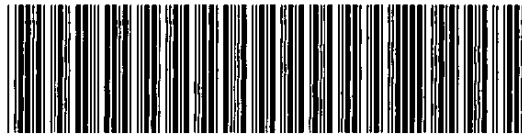
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

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

SUBJECT: Tropical Title Corp.

(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: Francisco A. Santos Jr.

Name (Printed or typed)

5400 S. University Drive

Address

Davie, Florida 33328

City, State & Zip

954-937-5575

Daytime Telephone number

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

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TALLAHASSEE, FLORIDA

**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:

Tropical Title Corp.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:  
5400 S. University Drive  
Davie, FL 33328

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Title Insurance 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):

Francisco A. Santos Jr.  
10641 NW 20th Court  
Sunrise, FL 33322  
President

Laura M. Santos  
10641 NW 20th Court  
Sunrise, FL 33322  
Secretary

Michael A. Mansueto  
5951 NW 42 Terrace  
Ft Lauderdale, FL 33319  
Vice President

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

Michael Mansueto  
5951 NW 42 Terrace  
Ft. Lauderdale, FL 33319


**ARTICLE VII INCORPORATOR**

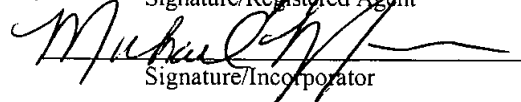
The name and address of the Incorporator is:

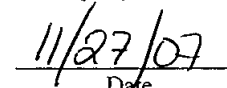
Michael Mansueto  
5951 NW 42 Terrace  
Ft Lauderdale, FL 33319

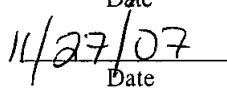
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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

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

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Date