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Office Use Only

COVER LETTER

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

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

| inclosed are an orig | inal and one (1) copy of the ar | ticles of incorporation and | d 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 CO | PY REQUIRED |

| FROM: | Michael J. Guju | | | |
|--------|--|--|--|--|
| i KOM. | Name (Printed or typed) | | | |
| | 31564 U.S. 19 North | | | |
| • | Address | | | |
| | Palm Harbor, FL 34684 | | | |
| | City, State & Zip | | | |
| | 727-LAND-LAW x 101 (727-526-3529 x 101) | | | |
| | Daytime Telephone number | | | |
| | | | | |
| | E-mail address: (to be used for future annual report notification) | | | |

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



December 7, 2012

MICHAEL J. GUJU 31564 U.S. 19 NORTH PALM HARBOR, FL 34684

SUBJECT: FLORIDA SIGNATURE TITLE, INC.

Ref. Number: W12000060879

We have received your document for FLORIDA SIGNATURE TITLE, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated in your document is not an active entity according to our records. Please reinstate this entity call (850) 245-6059 for information) or designate another entity that is active according to our records.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected 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) 245-6052.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 112A00029036

www.sunbiz.org

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

| | corporation shall be: Florida Signatu | · • • • • • • • • • • • • • • • • • • • |
|------------------------------------|---|---|
| <u>ARTICLE II</u> | PRINCIPAL OFFICE | SECHETARY OF STATE |
| | Principal street address | Mailing address, if different is: [, FLOR] |
| | 31564 U. S. Highway 19 North Palm Harbor, FL 34684 | |
| | | |
| RTICLE III | | A . 15 . 15 |
| e purpose tor | which the corporation is organized is: All Leg | ai Activites |
| RTICLE IV | SHARES 500 | |
| | res of stock is: 500 | |
| RTICLE V | | |
| | itie: Dixio Sells, President 31584 U. S. Highway 19 North | Name and Title: |
| Address: | 31584 U. S. Highway 19 North Palm Harbor, Ft. 34884 | Address: |
| | гал парог, гс мор4 | |
| Name and T | tle: Michael J. Guju, Vice President | Name and Title: |
| Address: | 31564 U. S. Highway 19 North | Address: |
| | Paim Harbor, FL 34684 | |
| | | Name and Title: |
| Address: | | Address: |
| RTICLE VI | DPGICTEDED AGENT | |
| | REGISTERED AGENT rida street address (P.O. Box NOT acceptable) Michael J. Guju, Esq. | of the registered agent is: |
| Address: | 31564 U. S. Highway 19 North | ARTICLE VIII EFFECTIVE DAT |
| | Palm Harbor, FL 34684 | |
| TICLE VII | INCORPORATOR | The effective date will be January 1, 2013 |
| | ress of the Incorporator is: | |
| Name: | Michael J. Guju, Esq. | · |
| Address: | 31564 U. B. Highway 19 North | _ |
| | Palm Harbor, Ft. 34884 | |
| ing been name certificate, I an | d as registered agent to accept service of process familiar with and accept the appointment as ex | ss for the above stated corporation at the place designated in selected agent and agree to act in this capacity |
| | | 12/17/2012 |
| bmit this docum | Required Signature/Registered Agent nent and affirm that the facts stated herein are | Date true. I am aware that the false information submitted in a |
| ument to the De | partment of State constitutes a third degree felo | ny as provided for in s.817.155, F.S. |
| | MK. | |