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PLEASE READ ALL INSTRUCTIONS BEFORE C	·
FLORIDA DEPARTMENT OF STATE	filed .
CORPORATION Katherine Harris	01 FEB 15 PM 3: 20
Secretary of State DIVISION OF CORPORATIONS	
UBR DIVISION OF CORPORATIONS	SECRETARY OF STATE TALLAHASSEE, FLORIDA
DOCUMENT # 19500094621	IALLAHASSEE, PLOTIDA
Southeast Title Services Group, Inc.	
Southeast Title Soil 18 11 7	
	APP
2. Principal Office Address 3. Mailing Office Address	M
1999 Ponce de Leon Blud 999 Ponce de lein Blud	
Suite, Apt. #, etc. Suite, Apt. #, etc.	
"601 "601	4. Date Incorporated or Qualified To Do Business in Florida
Coral Gables FL. Coral Gables FL	5. FEI Number Applied For
Zip Country Zip Country	6. Not Applicable
33134 USA 33134 USA	CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent	
Maria Fernandez Gomez	
Street Address (B.O. Bon Number is Not Acceptable) 1997 Tonce de Leon Blvd.	
Suite, Apt. #, Etc.	
Coral Grables	State Zip Code FL 33/46
8. I, being appointed the registered agent of the above named propration, am familiar with and accept the ob	, , , , , , , , , , , , , , , , , , ,
Signature of	
Registered Agent REGISTERED ACRIVIT MUST SIGN	Date 165. 12, 2001
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)	
Titles Name of Street Address of Each Officers and/or Directors Officer and/or Director	City / State / Zip
P N 999 Ponce d	Le Leon Blud Coral Gables 71.3310
Ires. Maria ternandez Jonez	
	200003818302==4
	-03/08/0101019012
,	****300.00 ****300.00
10. Learlify that Lam an officer or director or the receiver or trades	revided for in about 607 or 617 5 C. Life the second of th
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated	
on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.	
SIGNATURE 2/12/01 (315)4US-1/US.	
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE BOR DIRECTOR Date Daytime Phone #	



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MARIA R. FERNANDEZ GOMEZ

February 13, 2001

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

Via US Mail

Re: Southeast Title Services Group, Inc. Reinstatement Ref. Number: P95000094621

Dear Ms. Milligan:

Enclosed please find the reinstatement application for Southeast Title Services Group, Inc. and the annual renewal fees of \$300.00 as discussed. As your records indicated, my renewal for 2000 was never received as it was mailed to my former address and returned by the post office to you.

Please reinstate my corporation and assure that the correct address is changed in your system for this year. I appreciate your cooperation.

Very truly yours,

MARIA R. FERNANDEZ GOMEZ, ESC

MFG/kf