Requestor's Name

Charter Number Only

Charter Number Only

Charter Number Only

A Charter

000002619540--4 -08/19/98--01005--015 ****122.50 ****122.50

CORPORATION(S) NAME

\$210			
CHY a	nd Guilds	Title Cox	npany,
	1nc.		
		-	Toll Free: 1-1
$\overline{}$			Coll Fi
Profit NonProfit	() Amendment	() Merger	Toll Free:
() Foreign	() Dissolution	() Mark	1-800 9-98/AI
() Limited Partnership () Reinstatement	() Annual Report () Reservation	() Other () Change of Regis	
(X) Certifled Copy	() Photo Copies	() Certificate Unde	Seal 9
() Call When Ready () Walk in () Will	() Call If Problem () Pick	() After 4:30 Up () Ma	
Name	7		A N
Availability Document Examiner		- Cert	.COPY
Uprater			, ,
Verifier			
Acknowledgment			-
W.P. Vacifier		. <u> </u>	_

CR2E031 (R8-85)

ARTICLES OF INCORPORATION

of

City and QuilDS Titl (name of corporation)	e Company The
(name of corporation)	The second secon
The undersigned subscriber(s) to these Articles of Incorporation, natural per corporation under the laws of the State of Florida.	son(s) competent to contract, hereby form a
ARTICLE I - CORPORATE NAM	ME_{\perp}
The name of the corporation is:	IX Zes 9
City and Guilos Title Com	worker the second
ARTICLE II - DURATION	TARY OF STANSSEE FLOR
This corporation shall exist perpetually unless dissolved according to Florid	O: ORI
ARTICLE III - PURPOSE	0A 2
The corporation is organized for the purpose of engaging in any activities of United States and the State of Florida.	r business permitted under the laws of the
The corporation is authorized to issue	SUO
ARTICLE V - INITIAL REGISTERED OFFI	CE AND AGENT
The street address of the Initial Registered Agent office and the name of the	e Initial Registered Agent at that office is:
NAME PONALD DI REID	
ADDRESS 4216 ADAMS St	
CITY Hollywood FLORIDA	SSOS (
ciii ((a josos oj	
The principal office, if known, or the mailing address of the corporation is:	
NAME & City and Guilds Title Com	ipany, INC.
ADDRESS 6250 W. ORGENNO 4216 ADAM	s st
CITY HOLLY WOOD FLORIDA	ZIB 3205/

ARTICLE VI - INITIAL BOARD OF DIRECTORS

This corporation shall have ONC () directors initially. The number of increased or diminished from time to time by the By-Laws, but shall never be less than one (1). To f the initial director(s) of the corporation are as follows:	directors may be either the names and addresses
NAME RONDED D. REID	
ADDRESS 4216 ADAMS ST.	·
CITY HOLLYWOOD STATE FC	ZIP 33051
NAME	
ADDRESS	
CITY STATE	ZIP
NAME	
ADDRESS	
CITYSTATE	ZIP
NAME RONALD D. REID ADDRESS 4216 ADAMS St	• •
	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
CITY Hollywood STATE FL	t.
CITY Hallywood STATE FL.	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
CITY Hollywood STATE FL.	ZIB 3302
NAME ADDRESS CITY STATE	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
NAME CITY Hallywood STATE TO STATE NAME NAME	ZIP 3302
NAME ADDRESS NAME ADDRESS ADDRESS	ZIP 3302
NAME ADDRESS NAME ADDRESS ADDRESS	ZIP ZIP

(Seal)

CERTIFICATE AND KNOWLEDGEMENT OF REGISTERED AGENT

CERTIFICATE OF REGISTERED AGENT
OF

Cory	and	Quil Ds	Title	Company	INC.
		(name of	corporation)		

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at <u></u> {2	llo ADAMS	st th	ollywoo	d, FL 3	12051	<u> </u>	-
has named	ROVALD	D, REC	, O		SE TAL		**
	oresaid address, as	its Registered	Agent to a	ccept service of	المتكلف المتاريخ	athin	***************************************
uns state.	A	CKNOWLEDG	EMENT		RY OF STAT		

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)