

P99000012660

TRANSMITTAL LETTER

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

000002767730--1
-02/08/99-01105--005
*****70.00 *****70.00

SUBJECT: Atlantic Title Assurance Co., Inc.
(proposed corporate name)

Enclosed please find an original and one (1) copy of the articles of incorporation for the
above corporation and check in the amount of \$ 70.00.

FROM:

Thomas P. Flavin
Name
3210 N. Wickham Road, Suite 5
Address
Melbourne, FL 32935
City, State, & Zip
(407) 752-9967
Telephone Number

FILED
99 FEB -8 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Note: Additional copy of articles is needed when certified copy is requested.

2/9/99
MOR

ARTICLES OF INCORPORATION

OF

Atlantic Title Assurance Co., Inc.

ARTICLE I NAME

The name of the corporation shall be: Atlantic Title Assurance Co., Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

3210 N. Wickham Road, Suite 5

Melbourne, FL 32935

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: 10,000.

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

Thomas P. Flavin

3210 N. Wickham Road, Suite 5

Melbourne, Florida 32935

FILED
99 FEB -8 PM 1:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE V INCORPORATOR

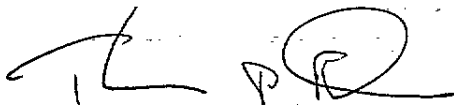
The name and street address of the incorporator to these Articles of Incorporation is:

Thomas P. Flavin

3210 N. Wickham Rd., Suite 5

Melbourne, FL 32935

The undersigned has executed these Articles of Incorporation this 2nd day of January, 1999.

A handwritten signature in black ink, appearing to read 'T. P. Flavin', is written over a horizontal line.

,Incorporator

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is:


Atlantic Title Assurance Co., Inc.

2. The name and address of the registered agent and office is:

Thomas P. Flavin

3210 N. Wickham Road, Suite 5

Melbourne, FL 32935


Signature: 

Title: President

Date: 2/2/99

99 FEB -8 PM 1:45
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Signature: 

Date: 2/2/99