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Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM

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DEPARTMENT OF STATE
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FOREIGN PROFIT/NONPROFIT CORPORATION

Eagle Nationwide Abstract Company, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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09 FEB - 6 AM 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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MRD 2/9

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Eagle Nationwide Abstract Company, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Pennsylvania

(State or country under the law of which it is incorporated)

3. 26-2962920

(FEI number, if applicable)

4. 06/17/2008

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. _____

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3 Dickinson Drive Suite 202, Chadds Ford, PA 19317

(Principal office address)

same

(Current mailing address)

8. To operate as a title insurance agency and/or abstract company.

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

By: _____

(Registered agent's signature)

Madonna Cuddihy

Special Assistant Secretary

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: William H. Bromley

Address: 3 Dickinson Drive Suite 202

Chadds Ford, PA 19317

Vice Chairman: _____

Address: _____

Director: Charles E. Mosony

Address: 3 Dickinson Drive

Chadds Ford, PA 19317

Director: _____

Address: _____

B. OFFICERS

President: Charles E. Mosony

Address: 3 Dickinson Drive Suite 202

Chadds Ford, PA 19317

Vice President: _____

Address: _____

Secretary: Thomas J. Feeney

Address: 3 Dickinson Drive Suite 202, Chadds Ford, PA 19317

Treasurer: James E. Kelly

Address: 3 Dickinson Drive Suite 202, Chadds Ford, PA 19317

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. _____

(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

FEBRUARY 4, 2009

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

EAGLE NATIONWIDE ABSTRACT COMPANY, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and
remains a subsisting corporation so far as the records of this office show, as of
the date herein.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and caused
the Seal of the Secretary's Office to
be affixed, the day and year above
written.

Pedro A. Cortes
Secretary of the Commonwealth

Certification Number: 7868183-1

Verify this certificate online at <http://www.corporations.state.pa.us/corp/soskb/verify.asp>